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ABSTRACT

This document consists of the three 2002 issues of a journal reporting new research in early child development conducted by the Frank Porter Graham Child Development Center (FPG) at the University of North Carolina at Chapel Hill. Articles in the Winter 2002 issue highlight some current work at FPG on factors that enhance or inhibit social and emotional development in young children, including dealing with antisocial behavior in preschool classrooms, the effects of quality child care and mothers' depression on young children, continuity of child care, and friendship formation among children with disabilities in various inclusive settings. The Spring 2002 issue focuses on current work with young children with disabilities, including the development of resources for teachers of visually impaired children, the Fragile X syndrome, a model of inclusion, and the cost, quality, and outcomes of preschool inclusion. Articles in the Fall 2002 issue deal with child and family policy issues, including the impact of welfare reform on families with members with disabilities, the new National Early Childhood Technical Assistance Centers to support implementation of early childhood provision of the Individuals with Disabilities Education Act (IDEA), and service coordination. Each issue also lists recent publications by researchers at the Frank Porter Graham Child Development Center. (KB)

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Early Developments, 2002.

Pam Winton and Virginia Buysse, Editors

Frank Porter Graham Center
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2002

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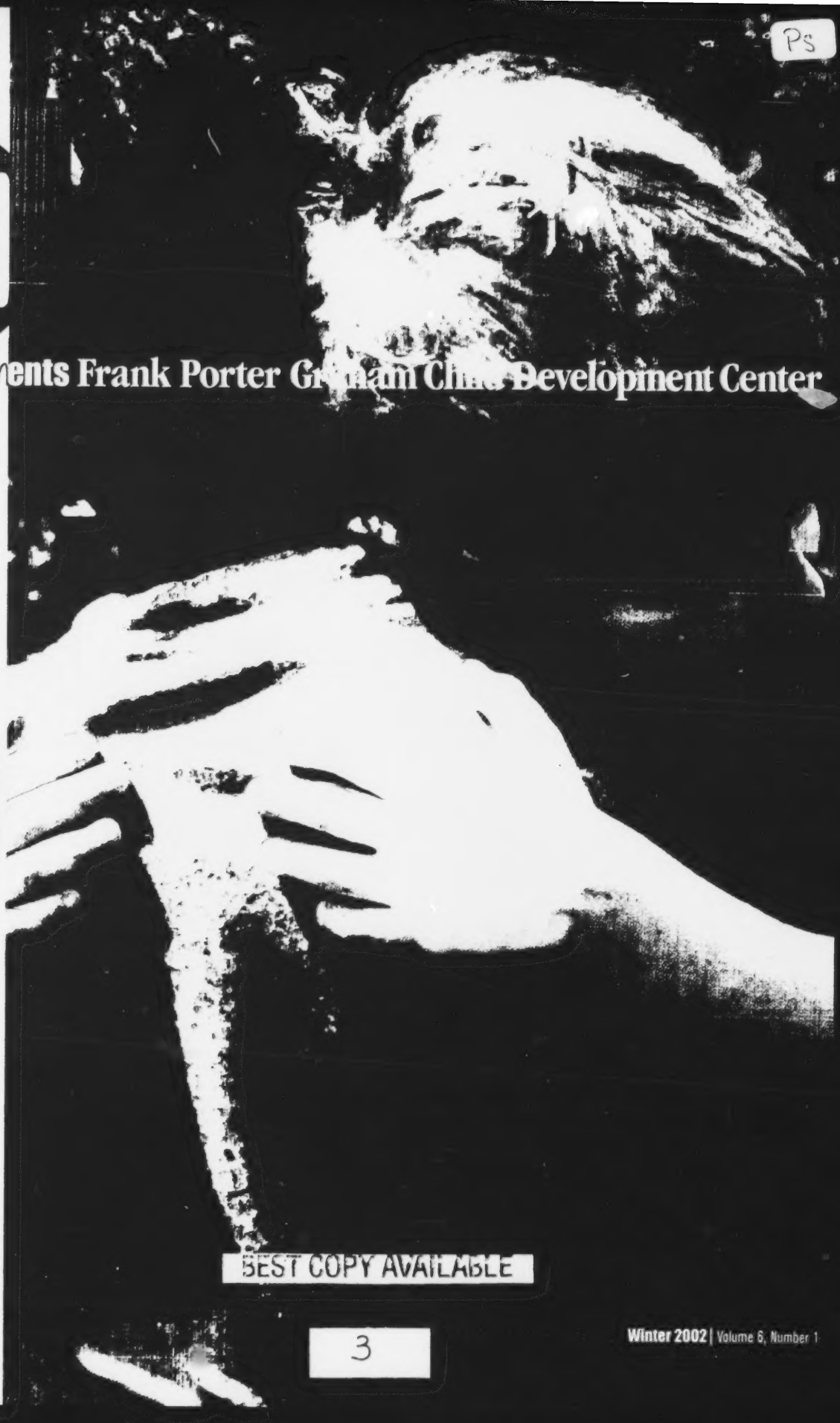

Social Processes and Outcomes

ED 469 969

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University of North Carolina at Chapel Hill

Winter 2002 | Volume 6, Number 1

Relationships

critical to healthy development

by Don Bailey Director, Frank Porter Graham Child Development Center

"HUMAN RELATIONSHIPS are the building blocks of healthy development." This quote, from *From Neurons to Neighborhoods*, a recent publication of the National Research Council of the Institute of Medicine, captures the essence of this issue of *Early Developments*. It also gets at the heart of current debates about the nature and consequences of organized programs for the care and education of young children.

Developmental psychologists and early childhood educators have long recognized that children are inherently social beings. From the moment of birth, infants and parents alike begin a process often referred to as attachment – the development of a close and enduring relationship based on mutual affection and caring. A secure attachment, one in which the child is confident of the loving and enduring nature of this relationship, is highly predictive of healthy social-emotional development. A healthy emotional relationship between parents and children also is important for healthy language and cognitive development. As children get older, they develop relationships with people other than their parents. These relationships include extended family members, neighbors, peers, child care professionals and teachers. These relationships are important because they provide other contexts in which children feel cared for and accepted. And it is in the context of these relationships that much learning occurs.

So what's all the fuss about? Why are social relationships the focus of much discussion in today's world of early childhood?

So what's all the fuss about? Why are social relationships the focus of much discussion in today's world of early childhood? Highly publicized and dramatic incidences of school violence propagated by students who don't fall into the traditional risk categories caused the nation to start asking questions about the roots of violence and looking to the early childhood period for answers. A recent study that linked aggressive behavior in young children with their participation in child care created headlines and led to lively debate among researchers about the findings and their implications for child care.

Another issue that has been the subject of much discussion is whether the growing emphasis on preparing children for academic success through pre-K programs might place too much emphasis on cognitive and literacy development to the detriment of social development. >

These issues are complicated and often emotionally charged. At least six specific issues have emerged as areas in need of further research into the factors that enhance or inhibit social development in young children:

(1) What factors challenge a healthy relationship between parents and children?

(2) What interventions are effective when children exhibit early signs of aggression and antisocial behavior?

(3) How does the placement of children in child care or early education programs affect their attachment relationships with their families and their social-emotional development?

(4) What should early childhood programs do to maximize children's social development?

(5) How can we balance the need to prepare children for success in school with the need to nourish social development?

(6) What challenges do children face in developing social relationships with other children who differ from them in terms of race, ethnicity, gender or ability?

This issue of *Early Developments* highlights some current work at FPG related to these questions. As an organization, we believe that the Institute of Medicine statement regarding the importance of healthy human relationships is of central importance to the early childhood field. We should be concerned about children's social-emotional development during the early childhood years. We need to make sure that programs serving young children preserve the important bonds that children have with their families.

We also need to ensure that early childhood programs attend to children's needs for warm and nurturing relationships with adults and peers and that teachers and other caregivers foster these important relationships through a variety of environmental and instructional approaches. **[ed]**

We need to make sure that programs serving young children preserve the important bonds that children have with their families.

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Challenging behavior

preschool classrooms

Linking research to practice

A SURVEY INVOLVING NEARLY 400 CHILDREN in preschools and child care centers indicates that 40% of preschoolers exhibit at least one antisocial behavior each day, 24% exhibit three or more per day and 10% exhibit six or more antisocial behaviors each day.

This new information comes at a time when preschool teachers report concerns about increasing rates of challenging behaviors in their classes.

"Some antisocial behavior can be expected in young children," said Donna Bryant, a senior scientist at the Frank Porter Graham Center and an author of the study. "If 40% children exhibit one antisocial behavior a day, we can't consider that 'abnormal;' if 10 to 25% children show high rates of aggressive behavior, we do need to be concerned."

She pointed out, however, that it is also important to keep in mind that the majority of preschoolers were not reported to show any aggressive behaviors on a daily basis. >

Types, frequency of antisocial behavior

Types	Frequency (% children rated)				
	Once per month or less	Once per week	3-4 times per week	Once per day	Many times per day
Hit or kick other kids	59	19	11	4	6
Push, shove, or grab other kids	53	17	11	10	10
Pinch or bite other kids	94	2	2	1	1
Argue or disagree with other kids	36	16	20	11	18
Threaten or "boss around" other kids	64	15	10	6	6
Call names or tease other kids	63	13	8	6	11
Do sneaky things when others are not looking	52	14	14	10	10
Take things when others are not looking	65	8	11	10	6
Play mean tricks	92	4	1	2	2
Tell kids not to play with someone who is not around to hear it	70	11	7	8	4
Tell lies about kids when they are not around	84	7	3	4	2
Say mean things about kids behind their back	82	11	4	3	1

Putting it in context

These data help researchers, policy makers and others understand the extent of the problems resulting from antisocial behavior that many preschool teachers report are on the increase The implications of these rates of antisocial behaviors are perhaps better understood in the context of a typical preschool classroom with 15-20 children, said Mike Willoughby, a doctoral student in psychology at the University of North Carolina at Chapel Hill and lead author of the study.

Data suggest that in an average-sized preschool classroom between six and eight children (about 40%) will exhibit at least one antisocial act each day. Furthermore, two of these children will likely exhibit six or more antisocial behaviors each day.

"From this perspective, we can better understand the pressures reported by early childhood educators and the need for additional training and resources to help teachers use effective and appropriate strategies to address these behaviors," said Willoughby.

Because these estimates are based on a random sample of children and classrooms, the authors note that specific rates of daily antisocial behavior may be greater in programs that serve more high-risk children, such as intervention child care and Head Start centers, or in classrooms where teachers don't have positive relationships with children or are not well trained in social and emotional development.

Prevalence by behavior

The study found that arguing-disagreeing was the most frequent antisocial behavior, while pinching, biting and playing mean tricks were the least common.

Data suggest that boys exhibit higher rates on four of the twelve items than girls: hitting and kicking, pushing and shoving, calling names and playing mean tricks. Boys and girls did not differ on any of the remaining eight items.

Overt, covert dimensions

Another purpose of the study was to investigate the structure of antisocial behavior in a normative sample of preschoolers. In studies involving older children, both overt (obvious) and covert (hidden) dimensions of antisocial behavior have been typically reported, but FPG investigators wondered whether this was true for preschoolers.

Janis Kupersmidt, professor of psychology at UNC-CH and another author of the study, said more research on subtypes of antisocial behavior is needed. "While some types of challenging behavior may be typical of normal development, others may not. These atypical behaviors may help to identify children who are at risk for negative long-term outcomes." It remains to be seen whether covert behaviors as defined in this study are actually early manifestations of more serious forms of covert behavior that were the focus of previous studies, she said.

Other findings

- Although overt antisocial behaviors were more common than covert behaviors, covert behaviors were not rare. For example, while 15% of children exhibited three or more overt behaviors each day, 10% of children exhibited three or more covert antisocial behaviors each day.
- Overt and covert antisocial behavior were about equivalent for males and females.

The majority of preschoolers were not reported to show any aggressive behaviors on a daily basis.

Implications

The primary implication of this study is the strong need for training and education of early childhood teachers and their supervisors on strategies for helping children learn to get along well together, control their anger and solve problems without resorting to aggression, Bryant said. Many positive strategies are effective in reducing such behaviors and the ultimate goal, of course, is to prevent them, she said.

The study took place in child care and Head Start programs in four counties in the Triangle area of North Carolina. The investigators are now conducting an intervention study as part of the Head Start Mental Health Research Consortium funded by the federal Administration for Children, Youth and Families and the National Institutes of Mental Health. This consortium has been helping Head Start supervisors, teachers and parents learn effective ways of dealing with children's antisocial behaviors. Parents want to learn better ways of helping their children, too, said Kupersmidt, but reaching parents requires different approaches than working with classroom teachers.

Willoughby said that while the finding of both overt and covert subtypes of behavior in preschoolers is new, he cautiously interpreted the results because the study used only teacher reports. "Future studies of covert antisocial behavior in early childhood will likely benefit from using multiple measures that include both adult ratings and observation paradigms," he said.

Implications for screening

The increasingly common finding that antisocial behavior among preschoolers is best viewed as multidimensional in nature has implications for early screening practices.

More research is needed to determine if preschoolers who exhibit developmentally inappropriate covert antisocial behavior are at increased risk for negative outcomes and if these apparently mild covert behaviors are precursors of more serious behaviors that are indicative of conduct disorder. |ed|

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Effects of quality care and mother's depression

RESEARCH INVOLVING SCIENTISTS AT FPG is adding to the growing body of evidence that shows how early education affects children's behavior, language and cognitive skills. A study sponsored by the National Institute of Child Health and Development found that three aspects of care were most predictive of children's language skills: how much caregivers talked to children, how much they responded to a child's question and whether the caregivers asked children engaging questions.

Interestingly, this study also found two factors that could hinder a child's cognitive development: too much TV and a poorly organized physical setting.

Earlier data from the same study showed that children of depressed mothers performed more poorly on measures of school readiness, verbal comprehension and expressive language skills at 36 months of age than children of mothers who never reported depression.

Children of depressed mothers were also reported to be less cooperative and to have more problem behaviors at 36 months. But these effects only occurred when depression resulted in less sensitive behavior on the part of the mother. Depressed mothers who were also poor were more likely to show low sensitivity to their children than mothers with more financial resources.

Collectively these findings show the value of caregiver sensitivity, the power of simple conversation and interaction, and the benefits of having stimulating materials in children's settings.

"In summary, these data underscore, again, the fact that high-quality child care can have many benefits for children," said Martha Cox, former senior scientist at FPG, now Director of the Center for Developmental Science at UNC-CH and one of the lead researchers nationally on the project. Working with her is Peg Burchinal, who directs FPG's design and statistical unit and serves as methodologist for the entire study, which is the largest long-term investigation of its kind ever undertaken. NICHD is following about 1,100 children from infancy, assessing the effects of child care.

The most recent data show that at age 4, children in better quality child care score higher on tests of thinking and language skills than others who stay home or who receive lower-quality care. Those findings mirror results reported two years ago for the same children at age 3.

"This is an important study because at age 4 children make the transition into school, and there are a number of expectations that we haven't imposed on them in quite the same way before," Cox said. "They go to school and are expected to have or attain skills related to reading and also cooperate in routines that are much more formal than what they were used to."

High-quality care

Both high-quality care, regardless of type, and center care, independent of quality, appeared to boost intellectual growth, memory and language skills. Differences were small but statistically significant. Those in lower quality care, for example, fell into the 42nd percentile, on average, in pre-academic skills, while those in higher quality care averaged the 57th percentile, Burchinal said.

Children with fewer than 10 hours a week of center care averaged the 44th percentile in language skills, while those with 30 or more hours a week fell into the 57th percentile, on average.

"This work documents more strongly than ever before that better educated and trained teachers are providing more language stimulation so that that the children they take care of show enhanced intellectual growth regardless of family background," Cox said. "Quality indeed makes a difference."

Unfortunately, one negative finding in the study caught the attention of some media, which lost sight of the many positive findings. The study found that youngsters spending more time in child care in general and center-based care in particular were somewhat more aggressive than other children who spent less time there or who remained at home.

Cox said, "Whether that heightened aggression is a problem that will continue remains to be seen."

Researchers found that children who spent more time in care outside the home were somewhat more aggressive toward other children and disobedient or defiant toward adults at 54 months and later when they were in kindergarten. They also were more likely to bully, fight with or act mean to others.

"We saw that three times as many kids with extensive child care – 30 or more hours per week on average between birth and 54 months – had behavioral problems compared with children with little child care – less than 10 hours per week on average," Burchinal said. "That was 16% of subjects in the former group versus 5% in the latter.

'Behaviors not extreme'

"At the same time, though, we want to emphasize that these were not extreme behaviors, were well within the normal range and might or might not disappear entirely later on," she said. "By the time the children were in kindergarten, differences had narrowed to 17% versus 9%."

Cox pointed out that the 17% figure is comparable to the number of kids in the normal population who would also be active in such ways occasionally. "Instead of citing this figure in an attempt to cast child care in a negative light, we should be using it to ask how to make child care better."

Burchinal noted that while 17% such children exhibited some modest behavioral problems, 83% are doing just fine. Higher quality care corresponded with fewer pro-blem behaviors, the study showed. Center care during infancy was not linked to either positive or negative trends among participating children.

The study found that children who watched more television scored lower on tests of mathematical reasoning and vocabulary and displayed more behavior problems. >

This work documents more strongly than ever before that better educated and trained teachers are providing more language stimulation so that the children they take care of show enhanced intellectual growth regardless of family background.

Women who were despondent most of the time not only were least sensitive but also were the only group to show a decline in sensitivity between the 15-month and 24-month assessments.

Depressed mothers

The earlier data about depressed mothers showed that maternal sensitivity played an important role in the well-being of children. Even when mothers were depressed, if they were also sensitive, their children fared better. Mothers who were respectful of their children, who were supportive of their children's activities and did not interfere unnecessarily, and who responded appropriately to their children's emotions were rated as sensitive.

"Even if mothers continue to be depressed, they can still provide the kind of experience their children need," Burchinal said. Also, women with higher incomes and other advantages were more responsive and played better with their children despite their depression possibly because they were less stressed. "Income made no difference in sensitivity and responsiveness among mothers who were not depressed, but was significant for the depressed mothers," said Cox.

Research has shown that mothers' interactions with their offspring play a crucial role in children's mental development, of which language skills are an important part.

Investigators consider their sample moderately representative of US mothers and their children. Overall, about 55% of the participants were never depressed and 8% were chronically depressed.

Women who were despondent most of the time not only were least sensitive but also were the only group to show a decline in sensitivity between the 15-month and 24-month assessments. As toddlers emerged from the period that some call the "terrible twos" and became less willful, interactions with mothers grew more positive.

In addition, at 36 months, the children were tested for cognitive and language development and observed following requests to clean up toys. Mothers also reported on their children's social behavior.

"Among other things, our findings suggest that women who are depressed shouldn't just

tough it out but instead should seek help from health-care professionals and support from family and friends," said Cox.

"We tend in our society to expect people to deal with their problems by themselves unless those problems are just very extreme," she said. "Our group of mothers were not chosen because they had come to clinics for help but were just a community sample of women having children. Other studies have shown that women with young children are particularly vulnerable to depression, and our new findings indicate strongly that the depression can have important consequences for children."

SUMMARY OF KEY FINDINGS

- Both high-quality care, regardless of type, and center care, independent of quality, appeared to boost intellectual growth, memory and language skills
- Higher quality care corresponded with fewer problem behaviors
- Three aspects of care were most predictive of enhancing a child's language skills: how much caregivers talked to children, responded to a child's question and asked children questions to prompt discussion.
- Two factors may hurt a child's cognitive development: too much TV and a poorly organized physical setting.
- Children of depressed mothers performed more poorly on measures of school readiness, verbal comprehension and expressive language skills at 36 months of age than children of mothers who did not report being depressed.
- Children of mothers who had more prolonged depression were seen as less cooperative, and their mothers reported the children had more problem behaviors than children whose mothers were never depressed. These children also scored lower on tests of school readiness, expressive language and verbal comprehension.

Other findings

- Children of mothers who had more prolonged depression were seen as less cooperative, and their mothers reported the children had more problem behaviors than children whose mothers were never depressed. These children also scored lower on tests of school readiness, expressive language, and verbal comprehension. Children of mothers who were depressed some of the time fell in between these two groups.
- Children whose mothers were more sensitive did better on cognitive and language tests, were more helpful in the clean-up task, and their mothers reported them to be more cooperative and to have fewer problem behaviors, regardless of their mothers' level of depression.
- Lower levels of maternal sensitivity in depressed mothers partly explained their children's poorer school readiness, verbal comprehension, and expressive language and higher rates of problem behavior. This suggests that depression can lead to less sensitive maternal behavior which, in turn, leads to poorer child development.

[ed]

Continuity

RESEARCHERS AT FPG are working on a three-pronged, six-year study that may begin to answer questions about the impact of having multiple caregivers during the infant and toddler years.

"Having many caregivers during these years is assumed to be harmful to children because changing primary attachment figures may lead to less advanced developmental progress as well as child distress," said Debby Cryer, lead researcher on the study. Thus, many experts recommend that child care programs keep the same caregiver with children until the children are at least 3.

"However, very little research bears directly on this, and no study has evaluated this in a longitudinal way," she said. "We do not yet know whether the theory matches reality."

Traditionally, young children in center-based child care programs have a series of different caregivers during the first three years of life. Centers often follow the lock-step ele-mentary school practice of moving children to a different class or teacher at the end of the year.

One prong of the FPG study is a longitudinal, randomized comparison in high-quality child care programs in which one group of children has the same caregiver for the first three years of life while another group has a different caregiver each year.

FPG has operated its own child care center for more than 30 years. Cryer said that several years ago, when theory seemed to indicate that continuity of caregiver was important, the FPG center began using this approach. "We found that some children did great with the same caregiver, but some didn't do as well.

For example, a particular caregiver might not get along with a particular child. And there may be caregivers who are good teachers at one level, but do not 'grow' professionally as the child grows. Also, some children seem to find changing caregivers a positive experience," she said. As a result of these unresolved issues, researchers decided to design a formal study.

The study has these components:

- a national mail survey of child care programs to examine current U.S. practices
- the longitudinal study mentioned above
- the perceptions of families and staff about these arrangements

The longitudinal study is well underway. Two groups, each with about 50 kids, have been randomly assigned to either continuity of caregivers or changing caregivers each year. A number of measures are being collected,

# of Care

including general developmental status, language development, temperament, attachment, quality of both home and child care settings, social and play behaviors and behavioral indicators of stress. For a sub-group, stress is also being measured physiologically through analyses of cortisol levels in children's saliva. To collect information for the qualitative aspect of the study, families and staff are being interviewed twice a year.

Cryer said, "We don't know what we're going to find. We already know that it's a complex issue, involving multiple interactions among the child, the caregiver and the family." Cryer pointed out that programs generally offer different levels of continuity of care:

- Keeping children and teacher(s) together for a certain number of years.
- Keeping a group of children together over a period of years.
- Keeping a few friends together over a period of years.

"Centers should also be aware that as children grow and develop, the children's environment must be changed to match their abilities and interest," said Cryer. "Also, the adults' treatment of children must move along to represent children's growing abilities."

National survey

The first part of the FPG study–the mail survey of child care centers–was completed by Cryer, Mark Wolery and Sarah Hurwitz, and shows that continuity of caregivers with infants and toddlers is rare.

"Small numbers of infants, and even fewer toddlers, remain with the same caregiver when they move from one class to another," said Cryer.

The survey found that many programs move children more often (from class to class, teacher to teacher) as soon as they reach certain developmental milestones, such as crawling or walking. Some centers even move children on a daily basis to meet ratio or other staffing requirement. "This is often done to make efficient use of program resources by keeping classes full and making space for enrolling infants for whom there is more child care demand," said the authors of the study.

In making decisions about when to move infants and toddlers from one class to the next, most survey respondents said they considered multiple factors. Developmental issues were considered foremost, such as reaching milestones or a certain age. However, decisions were also strongly influenced by more practical concerns, such as whether space is available in the next class or if a young child had been enrolled, requiring an older child to move up to the next group. >

Suggestions on offering continuity of care

If a center wants to offer continuity of care for infants and toddlers, **Debbie Cryer** had these suggestions:

- Avoid taking new children only in the youngest group; this forces moving children up one at a time and separates them from the teacher to whom they are attached.
- Recruit new children to fill in at upper age levels when it is more appropriate to have more children per adult.
- Use mixed-age groupings.
- Reward staff for longevity with the program.
- If a staff member leaves, overlap staff so that children are never left with strangers.

High rates of teacher turnover increase the likelihood that children will change teachers repeatedly during the infant/toddler years.

Reality of child care

These factors that influence decisions represent the reality of child care, in which staff try to balance developmental needs of very young children against efficient operations. In maintaining the balance, staff seem to avoid some practices associated with the poorest quality care. "For example," said Cryer, "when asked how often infants and toddlers were moved temporarily from one class to another to meet state ratio regulatory requirements, about half the respondents reported never doing so, and less than 5% said they did it on a frequent basis."

Respondents said the more frequent transition practices include talking about the move with the child's parents and having the child visit the new class. For the total sample in the survey, talking about the move with the child, getting the child's space in the new classroom ready and getting the child used to the new classroom's routines were also used in 75% or more of the centers. However, other strategies that might substantially increase the child's chance for security, such as moving children together, were used by only a minority of programs. Cryer said, "It is likely that these practices can be helpful for some children and their families, but the extent to which they are used, and the actual quality of the implementation is unknown."

Possible barriers

At first glance, staff and child turnover might be considered two of the barriers to practicing continuity of caregivers. However, researchers found no evidence of this in the national mail sample of 273 centers. Respondents reported that the vast majority of children who were enrolled as infants remain in the center until they are 3.

"There also seems to be sufficient staff longevity to allow continuity of caregiver, at least into a second year with the same caregiver," said Cryer. "However, practicing continuity of caregiver requires far more than low turnover in children and staff."

Agreement with a practice was associated with using that practice among survey respondents. For the total sample, less than 20% strongly agreed with the statement that "in an ideal situation, children should have the same teacher for the first 36 months of life." More than half either disagreed or were neutral in their response.

"To some extent, this explained why continuity of caregiver was not practiced. The lack of strong agreement with the practice may be a barrier to its implementation," said Cryer. **jedi**

If you want to know more

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Recent Publications

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Friendship formation

THERE IS GENERAL AGREEMENT among researchers that children's social and emotional competence during the early childhood years predicts later outcomes. For example, children who enter kindergarten without the requisite social and emotional skills (confident, friendly, able to get along with peers) are often plagued by behavioral, academic and social problems that can persist into adulthood, if untreated.

The ability to develop and keep friendships is an important indicator of a child's ability to carry out interpersonal goals.

"Furthermore, having a friend appears to offer both partners the potential for enhanced cognitive and language development as well as specific social and emotional benefits – an increased capacity for understanding another's perspective, the ability to regulate one's emotions, and a general feeling of well-being and happiness," said Virginia Buysse, a researcher at FPG.

The empirical evidence to date suggests that even very young children are capable of forming mutual friendships with peers. However, preschool children with disabilities often have more difficulties in developing friendship. The nature of friendships in young children with disabilities is the focus of a recent completed study by Buysse. In thinking about how children relate to their peers, it is important to distinguish between friendship, which refers to a special relationship between two children, and peer acceptance, an index of a child's social status within a group of playmates or peers, Buysse said.

Her study examined friendship formation in inclusive pre-K classrooms enrolling children with and without disabilities, an area that has received only limited attention in previous research. Of the 333 children in the study, 120 had special needs and 213 were typically developing preschoolers. They were from 18 early childhood programs in North Carolina.

The study assessed the effects of two types of inclusive pre-K classrooms: inclusive specialized classrooms (in which, for most of the programs, the majority enrolled were children with disabilities) and inclusive child care classrooms (in which the majority enrolled were typically developing children).

The study addressed these principal questions

(1) How many playmates and friends were reported by teachers for children with and without disabilities in the two types of inclusive classrooms?

(2) What child and program characteristics predicted the reported number of playmates and friends?

Preliminary findings indicated

- Children with disabilities in child care settings were 1.73 times more likely to have at least one friend than were children with disabilities in specialized settings.
- Children with disabilities were more likely to have typically developing friends if they were enrolled in child care rather than specialized settings.
- The type of setting had no effect on the probability of having friends with or without a disability for typically developing children.

Buysse said, "These findings can be used to inform decisions about how early childhood programs can achieve the goals of inclusion, particularly in the area of establishing and maintaining friendships among young children with and without disabilities. Specifically, the study results suggest that teachers and administrators should assess each component of the learning environment to determine whether there is a critical mass of typically developing children available to assist children with disabilities in carrying out their interpersonal goals."

Other researchers working with Virginia Buysse are Barbara Goldman and Martie Skinner.

Researcher–Constituent Collaboration

One goal of the National Center for Early Development & Learning (NCEDL) is exploring ways to increase constituent collaboration with researchers. By constituents, we mean the beneficiaries of our research.

"We want to go beyond focus groups and advisory boards," said Pam Winton, who directs the dissemination strand at NCEDL. "We want constituents to collaborate actively with researchers to identify the kinds of research information needed by parent, teacher, and other consumers and help determine the best ways to disseminate information. We feel this will ensure that our products are practical, relevant and reflect an appreciation for linguistic and cultural differences."

Among the three NCEDL projects that actively involve constituents, the Best Practices Study at the University of California at Los Angeles is an example of a meaningful researcher-constituent partnership in all phases of the research process.

Carollee Howes of UCLA, the principal investigator, said, "The Best Practices Study is seeking to expand the notion of quality child care and explore factors that contribute to the growth and development of under-represented children. To do this, we created a research design that involved constituents at different levels and times in the process."

She said that throughout the project her team has worked to understand the varieties of teaching and learning practices that encompassed high quality child care. "This was an ecological approach to understanding the growth and development of minority children and their families within the context of child care. Our goal was to remain conscious of value and belief systems across class, race, ethnicity and culture," Howes said. During the first phases of this project, the research team identified an advisory board of community members active in the child care community. The advisory board, the research staff and additional community members identified sites that served primarily low income children of color, and represented exemplary practices. This group also helped develop the research questions and provided ongoing advice. Once the sites had been nominated, researchers interviewed and observed the quality of the environment, adult child interactions and instructional practices. Both the experiences of individual children and a more global view of the classroom environment were documented. Sharon Ritchie, project director said, "Staff were interviewed to enhance our understanding of the philosophies of the individual programs. In addition, focus groups were held so we could compile multiple perspectives, and for program teachers and directors to communicate about each other's practices."

As the project progressed, researchers worked to gauge long-term outcomes at the original 10 sites by following 72 individual children after they completed preschool.

Ten new sites were added in a segment entitled the "Partnership Project." The criteria for selection were demographics, location and willingness to engage in a year of inquiry about their

Researchers report that their research has been enhanced by constituent involvement.

– Pam Winton

practices and philosophy. Ritchie said, "Our first objective was to determine, in the context of developing positive relationships between researchers and practitioners, whether unique practices of the original best practices sites could be learned and used by new sites. The second objective was to reduce barriers that traditionally prevent researchers and teachers from benefiting from one another's expertise."

Thus, the heart of the research project was the intentional construction of trusting relationships between the researchers and the participants-subjects who were the teachers and directors of the participating child care centers.

Benefits evident

While much of the data concerning best practices are still being collected and analyzed, the impact of the collaborative relationships is already evident. "Regular, respectful and sustained contact helped us to both collect data and, in partnership with participants, engage in dialogue about program practices and possible changes that could enhance the experience of young children in their care," Howes said. "Relationships were intentionally redefined to broaden the researcher role to one of partner and supporter and the participant role to include contributor." Researchers supported this relationship with activities such as financially supporting teachers' and directors' expertise and time, holding a reception honoring the work of the child care programs, creating opportunities for the program staffs to meet each other and network and creating a brochure highlighting the sites. Another example: The participants-partners constituent group participated in a Best Practices Synthesis Conference at UCLA. Staff from the sites were either facilitators or discussants for small groups throughout the two days. Each person was paid for her/his work and scholarships were given to two staff from each child care center. Reflecting significant buy-in and partnership, centers sent additional staff at the center's expense. An additional support was a Spanish-English translator for simultaneous translation of the proceedings.

Howes said, "We developed specific activities and structures to sustain and define the exchange of information between researchers and constituents. The child care program staff helped interpret the data, plan for next steps, and commented upon and, in some cases, learned to use measurement instruments. A regular feedback loop was created between the 'research partners' [NCEDL staff] and the entire staff of the child care programs about study findings and data."

One outcome was the discovery of the need to focus on directors more; and as a result, the project created a focus group for that set of constituents. >

Collaboration

Time was a challenge

Researchers said that one challenge to implementing constituent involvement was the time constraints that affected all participants. Considerable time and energy was devoted to creating and sustaining the relationships between constituents and researchers.

Winton said that other NCEDL projects also acknowledged time constraints. "Sustaining involvement and interest over time has been a challenge, but it appears that as long as the work is relevant and meaningful, constituents remain involved and committed."

Winton said, "Overall, we're quite pleased. Researchers report that their research has been enhanced by constituent involvement. Whether that involvement is direct and immediate, as when participant and partners help interpret data or more indirect, as when constituent perspectives are simply shared at advisory board meetings, the contributions by constituents are valued and effective."

She said, "Constituents had opportunities to contribute in meaningful ways, shaping research questions, research implementation and dissemination of research findings. In the Best Practices Study, for example, a center director suggested the sharing of the study results with the child care sites at the conclusion of the study. The center director said that researchers "could not simply expect to take from the sites but ... needed to provide them with feedback about what [we were seeing] in a way that was useful to them in a day-to-day fashion."

Winton said, "Our experiences have set a positive precedent for the involvement of constituents in a variety of roles. Policy will be more relevant and effective when the information shaping it emerges from the real experiences of families and practitioners. Practitioners need information that is accessible, meaningful and conveyed in ways that respect their experiences.

"Families and non-professionals need to help shape research so that it is asking the 'right' questions, and sharing the answers to those questions in ways that consumers can have easy access to, understand and effectively translate into practice," she said. |NCEDL|

If you want to know more

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More about NCEDL's overall Constituent Advisory Board is online at www.fpg.unc.edu/~ncedl/PAGE/constit.htm

Teacher education programs

Background

- A growing body of research indicates that the education of early childhood professionals is positively related to the quality of programs.
- Policymakers are increasingly aware of the wide discrepancy between what research says about the important role of early educators and existing policies and practices that don't support an adequately paid, professional workforce.
- The 1998 Head Start Act requires that 50% of Head Start teachers have at least an Associate's degree by 2003.
- The recent report of the Committee on Early Childhood Pedagogy recommends that all children in an early childhood program (ages 2-5) have a teacher with at least a Bachelor's degree.
- A critical factor to the success of these state and federal pre-K efforts is an infrastructure for preparing high-quality teachers to enter the early childhood workforce.

A NATIONAL SURVEY OF INSTITUTIONS of higher education (IHEs) with early childhood programs indicates that these programs are in need of support, according to Diane Early and Pam Winton, lead researchers on the NCEDL study.

"Overall, programs will not have adequate faculty to meet the projected workforce needs during this era of stronger teacher preparation requirements," said Early. "In fact, using these data we estimate that a 76% increase in early childhood faculty would be needed if all current early childhood teachers were required to obtain a Bachelor's degree."

Data also indicate that the faculty members in early childhood programs are working harder than their colleagues elsewhere in the same IHEs. They are serving more students with fewer full-time faculty members, compared to IHEs as a whole.

The survey found that there are many early childhood teacher preparation programs in the United States (over 1,200 nationwide or almost one-third of all IHEs). Less than half offer a Bachelor's degree, with most offering Associate's or less than Associate's degrees.

"This mirrors current early childhood personnel standards that typically do not require staff to have either a Bachelor's or an Associate's degree," Winton said. >

Data show that the highest-rated challenge of early childhood [teacher education] programs is "difficulty attracting and retaining ethnically and linguistically diverse faculty."

Faculty-related findings

Data show that the highest-rated challenge of early childhood programs is "difficulty attracting and retaining ethnically and linguistically diverse faculty." The challenges that face all of higher education of creating diverse faculties are present in early childhood teacher preparation programs. The fact that early childhood department chairs and directors report attracting and retaining ethnically and linguistically diverse faculty as their biggest challenge affirms their awareness of the problem.

Data comparing early childhood programs with the larger institutions in which they reside indicate that early childhood teacher preparation programs tend to have a small number of faculty who serve a larger number of students. The average student to full-time faculty ratio of 61:1 is 60% higher than the 39:1 ratio of the higher education institutions in which these programs reside.

Furthermore, early childhood programs tend to have a greater percentage of part-time faculty members than do the institutions in which they reside. This is particularly true of early childhood programs at two-year IHEs; they have less than half the number of full-time faculty and almost twice the number of part-time as compared with early childhood teacher preparation programs at four-year IHEs.

The data indicate a gap between the stated mission of the programs and students' experiences in terms of preparing students to work with children with disabilities. For instance, almost 80% of Bachelor's programs indicate that preparing early interventionists is part of their mission; however, only 60% require one course or more addressing working with children with disabilities.

Scope of study

NCEDL conducted a nationally representative survey of chairs and directors of early childhood teacher preparation programs at two and four year colleges and universities. The respondents represent programs that prepare students to work with children any ages prior to kindergarten entry. The survey excluded programs that prepare students to work only with children in kindergarten or older.

The 438 IHEs in the survey were in 47 states, plus Washington DC, Puerto Rico and the US Virgin Islands.

A similar gap exists with regard to preparing individuals to work with infants and toddlers. For instance, although 95% of the Associate's programs report that the age range covered by their program includes infants and toddlers, only 60% require a course or more on the topic, and only 63% require a practicum experience.

"Survey data indicate that access to Bachelor's degree programs after completing an Associate's degree continues to be a problem because of articulation challenges," said Early. Articulation refers to the policies, guidelines, and practices that allow students to transfer credits earned in one university or college to another. Half of Associate's programs offer an Associate's in Applied Science (AAS), which is usually a terminal degree and not typically included in articulation agreements that guarantee a smooth transition of students from two-year to four-year programs.

This situation creates roadblocks for early childhood personnel graduating from AAS programs who want to pursue four-year degrees. Because four-year programs typically have some leeway in the policies and guidelines set by their universities about accepting credits, the motivation of faculty to address problems is important. Early said, "Our data indicate that faculty in two-year programs are more aware of this challenge than are their colleagues in four-year programs, suggesting that faculty awareness in four year programs may be a roadblock to making needed changes."

Other major challenges cited by IHEs include "students' competing work or family-related responsibilities" and "attracting and keeping students due to poor working conditions and wages in the field of early childhood."

IMPLICATIONS FOR POLICY MAKERS

- Resources must be earmarked to support the overall quality and accessibility of early childhood teacher education programs.
- Resources must be earmarked to address the lack of diversity in our early childhood faculty ranks.
- Attention must be paid to articulation or transfer-of-credit issues.
- Resources must address the poor working conditions and wages of the early childhood workforce, especially for teachers of infants, toddlers, and preschoolers.

Winton said, "Low salaries, lack of benefits, lack of a coordinated system of career paths, and few rewards for pursuing higher education are characteristics of careers in early childhood education so it is not surprising that attracting students is a challenge.

"No matter how innovative our early childhood programs are, they will fail if we do not provide the infrastructure to support a well-educated and adequately compensated staff," she said.

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EDITOR'S NOTE Data from this survey was was used to update the National Directory of Early Childhood Teacher Preparation Institutions. The directory was published in collaboration with the Council for Professional Recognition and is online at http://www.cdacouncil.org/. Contact the council if your institution is not listed or if you wish to add, delete or change information. Telephone 202-265-9090 or 800-424-4310 or send email to directory@cdacouncil.org.

If you want to know more

Spotlight #22. **Directory of teacher-prep institutions. NCEDL.** http // www.fpg.unc.edu/~ncedl/PDFs/spot22.pdf

Spotlight #33. **Preparing early childhood workforce. NCEDL.** http // www.fpg.unc.edu/~ncedl/PDFs/spot33.pdf

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Recent Publications

Winter 2002 from the National Center for Early Development & Learning

Bailey
Bruer
Burchinal
Casey
Cattlett
Clifford
Cox
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Hamre
Higgins
Kraft-Sayre
LaParo
Lichtman
Pianta
Rimm-Kaufman
Roberts
Saluja
Scott-Little
Symons
Winton

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Spotlight #30: (Jan. 2001). ***New book examines out-of-home care.*** Chapel Hill: UNC-Chapel Hill, FPG Child Development Center, NCEDL.

Spotlight #31: (Feb. 2001). ***New book looks at windows of opportunity in children.*** Chapel Hill: UNC-Chapel Hill, FPG Child Development Center, NCEDL.

Spotlight #32: (Mar. 2001). ***New family literacy bibliography.*** Chapel Hill: UNC-Chapel Hill, FPG Child Development Center, NCEDL.

Spotlight #33: (April-May 2000). ***Preparing the early childhood workforce.*** Chapel Hill: UNC-Chapel Hill, FPG Child Development Center, NCEDL.

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Children with Special Needs

news

Don Bailey
Director of FPG

Bailey Receives AAMR Research award

Don Bailey, director of FPG, received an award for his research on mental retardation from the American Association on Mental Retardation (AAMR) at the association's 126TH annual meeting in Orlando, FL.

AAMR presented its annual Research Award to Bailey "for formulations and investigations that have contributed significantly to the body of scientific knowledge in the field of mental retardation."

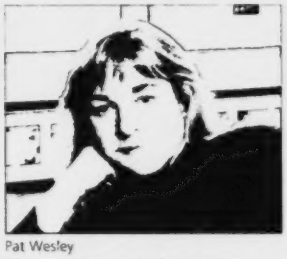
Bailey appointed W.R. Kenan, Jr. Professor

The Board of Trustees of the University of North Carolina at Chapel Hill approved the appointment of Don Bailey as W.R. Kenan, Jr. Professor effective July 1, 2002. This honor recognizes Don's leadership as a researcher and director of the FPG Child Development Institute during the past ten years.

Unexpected Journey wins Silver Reels award

Unexpected Journey: The Earliest Days, a 24-minute documentary produced by the Partnerships for Inclusion project at FPG, won a Silver Reels award January 12. The Silver Reels regional competition honors video, film and interactive communications from across North and South Carolina.

Produced by Pat Wesley in collaboration with Julie Dixon of Raleigh-based Words and Pictures, the video follows several families through the earliest days of parenting premature infants. *Unexpected Journey* also addresses ways to promote smooth transitions for the family and child as they prepare to leave the hospital and begin their lives together in their communities.



Pat Wesley
Director of Partnerships for Inclusion

To Learn More
Visit the PFI website at
www.fpg.unc.edu/~pfi

A New Name, a New Look

The Frank Porter Graham Child Development Center is now the FPG Child Development Institute. Our mission is the same as it was 30 years ago when we were founded... to cultivate and share the knowledge necessary to enhance child development and family well-being. Our modified name, new logo, and tagline (*advancing knowledge, enhancing lives*) are designed to help us communicate our mission more clearly with the consumers of our research, teaching, and outreach efforts.

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For the development and well

NATIONAL REPORTS indicate that in a given year as many as 5.5 million children are identified as having a disability that interferes with school performance and requires special education services. Some disabilities are obvious at birth, occurring as a result of genetic disorders or birth trauma. Others can emerge later in life as a result of injuries, illness or environmental factors. Whatever the case, there is now widespread agreement that disabilities must be identified as early as possible and the appropriate services provided.

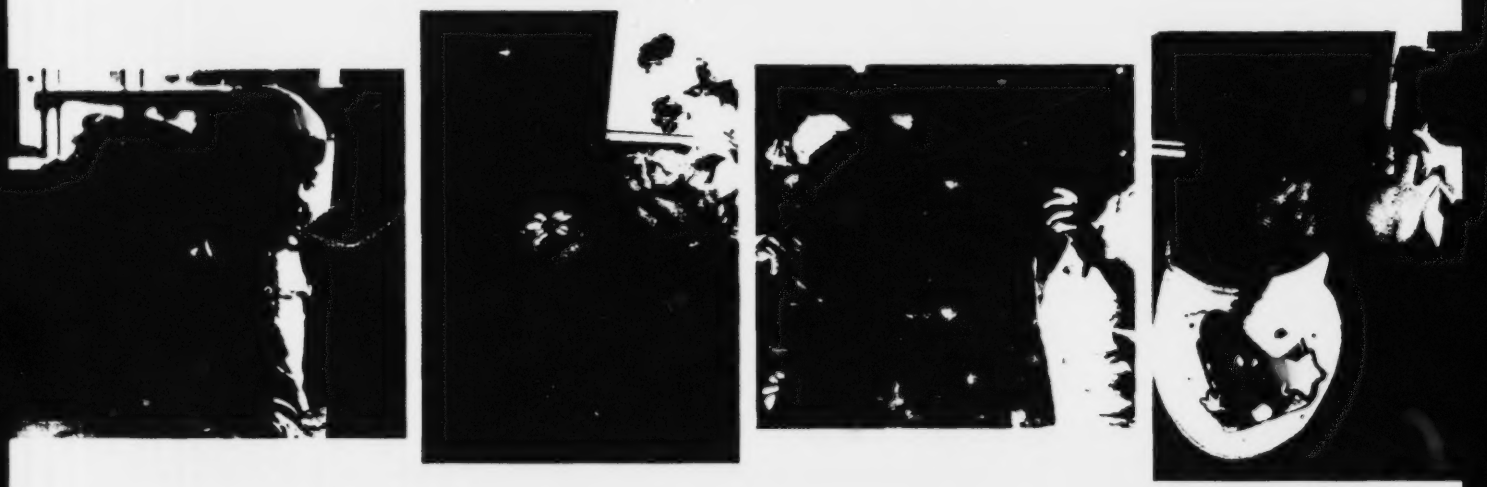
This issue of *Early Developments* highlights some of our current work with children with disabilities. Since our main focus is on the early childhood period, we are especially concerned about promoting earlier identification and improving early intervention and preschool services. Recent reports show that while 11-12% of school-age children are eligible for special education services, less than 2% of children receive early intervention services during the first three years of life and less than 5% during the preschool years. The peak enrollment of children in special education services occurs at age 10. This means that many children's disabilities are not identified until after they enter school and experience failure.

Our commitment to disability-related work goes back to the earliest days of our institute and the involvement of the Kennedy family in mental retardation programs and legislation. It is well known that President John F. Kennedy had a sister with mental retardation. One outgrowth of Kennedy's work was the establishment of a national network of mental retardation research centers. FPG was part of a consortium of organizations at UNC that was funded as one of the original 12 Mental Retardation Research Centers in 1966 and we continue this affiliation today.

Since the 1960s, we have been involved in a wide range of disability-related activities. These include basic research, the development of models for working with children and families, studies of disability policies, and training and technical assistance activities designed to help policy makers and practitioners develop and implement high-quality services. We have also focused much of our efforts on understanding how children with disabilities can be included in programs for children without disabilities. As a part of this work, the child care program at FPG has been a fully inclusive program and the staff have worked hard to model effective inclusionary practices since 1984. Examples of those practices at the FPG child care center are presented in an article in this issue.

being of all children

By Don Bailey, Director of the FPG Child Development Institute



Some of our work focuses on specific disabilities. We have projects involving children with disorders such as vision impairment, autism and spina bifida. This issue features an article on our studies of one particular disorder–fragile X syndrome–and the challenges surrounding early identification and the provision of services. From projects such as this one, we hope to learn about the specific learning needs of children with identifiable conditions, trying to determine the needs that are unique to each disorder in comparison with the needs that are common to almost all children. This work draws heavily on the individual interests of investigators working at the center. Other research, however, is not so focused on a particular disorder, but on children with special needs as a group. From this perspective, the range of disabling conditions and needs is enormous. Our challenge is to discover ways that service systems can respond appropriately to this wide variation in needs and abilities.

Serving young children with special needs is a complicated endeavor. It requires coordinating the medical, educational, public health and mental health communities, and working in partnership with schools, child care programs and families to provide appropriate support for children and families. A comprehensive set of national and state laws and regulations govern these activities, but as expected, the challenges often come in the appropriate implementation of policy.

We try to engage in work that helps us understand how policy affects practice, and how practice can be modified to be consistent with policy. In this issue, we look at one FPG project—the Early Intervention Training Center for Infants and Toddlers Who Have Visual Impairment—and how it is helping colleges and universities prepare personnel to serve children with this disability.

At FPG, we believe strongly in conveying the results of our research not just to fellow academicians, but to a larger audience of policy makers, service providers, and parents, who can put the findings to use right away. In this regard, we are particularly proud of the work of the National Center for Early Development & Learning, whose information dissemination program is featured in this issue.

Our work on disability issues emphasizes our belief that we need to be concerned about the development and well being of *all* children. By focusing part of our effort on disability, we can reinforce the notion that every child needs to be viewed as an individual with his or her unique styles of learning and developmental growth.

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Focusing on Vision

Developing Resources for Teachers of the Visually Impaired

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As a preschool director for a state school for the blind, a graduate student focusing on visual disabilities, and a researcher at FPG specializing in early childhood visual impairment, Deborah Hatton has seen the problem first hand.

"Early intervention can help infants and toddlers with visual impairments and their families face many of the challenges of growing up without sight," Hatton says. "Yet there is a shortage of teachers and other personnel who are prepared to provide this support."

Preparing additional teachers of children with visual impairments (TVIs) is the responsibility of colleges and universities with programs in this specific field; however, they can be aided in that mission by having access to resources that help prepare personnel to serve infants and toddlers with visual impairments. That is the primary mission of The Early Intervention Training Center for Infants and Toddlers with Visual Impairments, a project directed by Hatton and funded through a five-year grant from the US Office of Special Education.

Researchers estimate there are approximately 20,000 children with visual impairments in the United States in the birth to five age range. In 2000, US colleges and universities turned out only 273 teachers of the visually impaired, 77 instructors in orientation and mobility, and 38 with dual certification (teachers of children with visual impairments and orientation and mobility), and these personnel typically were hired to provide services to children between the ages of 5 and 21 years. That leaves a big gap in time during which children with visual impairments and their families miss out on valuable intervention services.

Visual impairment can affect childhood development in numerous ways. Unable to make visual links with caregivers and with their surroundings, children with little or no sight may face particular challenges in preverbal communication, motor development, and areas of cognitive development such as body, object, spatial, and other basic concepts that are ordinarily acquired incidentally through vision. Parents of infants and toddlers with visual impairments may also become perplexed or depressed when the child fails to respond to eye contact or smiling, or acts in a way that may be interpreted as rejection (examples of such behavior include stilling or freezing at the sound of the parent's voice, lack of facial affect).

At the same time, children with visual impairments can function successfully if they and their families are provided appropriate support. For example, caregivers can vocalize more extensively to provide cues about their whereabouts and the surrounding environment. They can use touching games and sound cues to help infants anticipate certain actions. Caregivers report that support from early interventionists in specific strategies and techniques for teaching their children with limited vision, as well as information about the specific eye condition and prognosis, are most helpful. Yet this kind of support has not been widely available.

Dr. L. Penny Rosenblum, a faculty member from the teacher preparation program in visual impairment at the University of Arizona, is also an investigator on the FPG early intervention project who serves as a liaison to the universities that prepare TVIs.

During the first six months of the project, Hatton focused on developing partnerships with university faculty who prepare teachers of children with visual impairments. Since then, she and her colleagues have been developing a series of multimedia, interactive content modules geared toward a university audience. Video clips show parents of children with visual impairments talking about the supports they need for their young children and give examples of exemplary early intervention practices. Case stories have been developed with activities based on them.

For many years, early intervention did not exist in most areas of the United States for children with visual impairments under the age of 5. We now have approximately 20–30 university programs in the United States that prepare teachers of children who are visually impaired.

Because visual impairment is a low incidence disability, however, these university programs may have relatively small numbers of students, and so the programs are difficult to sustain. Often, faculty members must spend considerable time in grant preparation to keep their programs running, and they may not have time to develop their own materials. We hope to make their job easier by giving them materials they can infuse into existing courses.

Family centered support, typically provided during home visits, is the foundation for effective early intervention.

The modules will be available in multiple formats. A printed copy with objectives, major points, instructional sequence, overhead transparencies, case stories and activities, recommended readings, and study questions will be available. In addition, a audio-narrated CD of a multimedia program will be available. The CD will be configured so that it can be accessed by screen readers for individuals without vision. "Our mission is not just to get the information out, but to make it easy and interesting to use," Hatton says.

While these resources and materials are primarily for use by faculty, Hatton believes the materials are flexible enough to be used by families, as well as agencies and individuals that work with the visually impaired. The materials should be useful in preparing personnel in the fields of child development, speech/language pathology, occupational science, physical therapy, and medicine.

The project has created an electronic mailing list and a web site (**www.fpg.unc.edu/~edin**.). These will be used to share information about resources and to secure feedback from practicing professionals and future consumers as materials are developed.

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To learn more

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For more information about this project, please call Project Director Deborah Hatton at 919-966-7186 or email deborah_hatton@unc.edu.
Project web site: www.fpg.unc.edu/~edin.

Fragile X

It is the most common inherited form of mental retardation, yet it often remains undiagnosed for the first three years of a child's life. It is not curable at the present time, but early identification can lead to educational and therapeutic treatments that can help affected families and children cope with the condition. Fragile X syndrome (FXS) is gradually coming into the limelight and the FPG Child Development Institute is pioneering research defining early development and intervention strategies.

First named in 1969, it was not until 1991 that several international teams of researchers discovered the gene that causes fragile X syndrome and an understanding of the way it is inherited. Fragile X is a single-gene disorder carried on the X chromosome. The disorder can be passed through several generations in a carrier state, with each generation having a higher risk of the gene causing the syndrome itself. An expansion of this gene (FMR1) leads to a lack of production of a protein believed to be essential for normal brain functioning. Both males and females can have the disorder, however, males are usually more severely affected than females. Most will have mental retardation, ranging from mild to severe. Many will experience delays in development, most notably in cognitive and communication skills. Males may develop distinguishing physical features, including large ears, loose joints and muscles, and an elongated face. However, children born with fragile X look and behave normally at birth with the result that few are immediately identified as having the condition.

With the understanding of fragile X as a genetic disorder, the scientific community has pursued two main lines of inquiry. One seeks to understand the molecular consequences of the condition with the hope of some day developing targeted pharmacological treatments and gene therapy. The second line, pioneered by FPG, seeks to understand the developmental, behavioral, and functional aspects of fragile X.

FPG is the first and only group defining the early development of fragile X

In 1993, FPG received the first grant to describe the early development of children with fragile X. Prior to this, research had been done only on older children and adults with the syndrome. Interviewing 41 mothers of young boys with fragile X, FPG researchers learned that fragile X was typically not diagnosed until children had reached a mean age of 35 months. For the most children, a parent, usually the mother, first became concerned about the child. The parent most often noticed a delay in meeting expected developmental milestones. They may have noticed other problems, including speech delays, health problems, and lack of eye contact or attentiveness. Pediatricians or other physicians whom the parents consulted often downplayed their concerns, especially if the child was under 18 months, suggesting that the child was simply late in developing.

The study clearly showed that society is slow to identify children with fragile X. As a result, parents of these children become unnecessarily frustrated with their own parenting skills and with their children, whose delayed development they do not understand. Parents may also become disenchanted with medical professionals who fail to recognize the condition. Children and families miss two-to-three years of support from an early intervention system that is in place and available for services; families fail to get important information on genetic risk which might have affected their decisions about bearing subsequent children.

Since this first grant was awarded, an interdisciplinary team of researchers at FPG and other UNC schools have conducted a series of studies on early development. Principal researchers include Don Bailey, Deborah Hatton, Jane Roberts, Joanne Roberts, Penny Mirrett, and Jennifer Schaaf. These studies have led to more than 20 publications and wide recognition of FPG as the primary research center studying FXS during the early childhood years. Currently, FPG is conducting seven studies on fragile X. These include a study on the neuropsychological functioning of fragile X children in late elementary and middle school; a study of the life functions of the same group, including where these children go to school, what their interactions are with other children, and what opportunities they have to participate with other children; completion of a pilot project looking at early identification issues for children at 9, 12, and 18 months of age; two studies on language development and hearing for children with fragile X; a study observing parent/child interactions of families with children with fragile X; and a grant from the Ronald McDonald House Charities to set up a web site for parents and practitioners distilling crucial information about fragile X and addressing issues in the field. The latter grant is consistent with FPG's mission of linking research with outreach.

What is the significance of fragile X research at Frank Porter Graham? "FPG Child Development Institute

and developing an understanding of its consequences for families.

is the first and only group defining the early development of fragile X, and developing an understanding of its consequences for families," says Don Bailey, director of FPG and principal investigator of the initial study. "Our immediate goal is to learn enough about fragile X syndrome so that we can help improve early identification and design appropriate early intervention strategies.

"Our studies of fragile X could also provide a prototype for how society will deal with other genetic disorders," Bailey continues. "With the advances in the Human Genome Project, we will soon be able to identify a whole host of disorders whose origin can be traced to the mutation of specific genes, some of which are inherited and passed down from generation to generation. This capability will raise a number of challenging questions, including whom we should screen, what disorders we should screen for, and what to do when disorders are discovered. By focusing on fragile X, we can answer questions broadly related to other disorders."

Several critical questions remain unanswered with respect to fragile X itself. Though estimates of 1:4000 males have been made, the true incidence of the syndrome is unknown. Likewise, factors such as ethnicity have not been studied, and more needs to be learned about infant development to help pediatricians do a better job of identifying the disorder. Toward this end, FPG has applied for a grant to plan a very large study in which researchers would screen approximately one million children to determine the incidence rate and what the behavior and development of affected children looks like in the first year, and to test different models for early intervention.

"FPG provides a great context for studying this and other disabilities," Bailey says. "We have an interest in covering the waterfront from understanding the basic phenomenon to understanding the ramifications for society." | ed |

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A Model of Inclusion

With the 1975 passage of the Education of Handicapped Children Act, and its reauthorization in 1990 and 1997 as the Individuals with Disabilities Education Act (IDEA), Congress called on states to embark on a bold effort to incorporate children with disabilities into the mainstream of education. That effort has met with mixed results nationwide, but at the FPG child care center, inclusion of children with disabilities has been the norm since 1984. Results of that effort suggest that inclusion can be beneficial for both children with disabilities and those who are typically developing.

Housed in the first two floors of FPG, the child care program serves 80 children ranging in age from 6 weeks to 5 years old. It is a full day program, operating from 7:30 AM to 5:30 PM and open year round. Approximately 30% of the children within each age group have an identified disability, with slightly more children with disabilities enrolled in preschool classrooms than in the infant-toddler groups. A diverse range of types and severity of disabilities are represented, including Down syndrome, cerebral palsy, other specific syndromes, children who are medically fragile, and autism.

The program is accredited by the National Association for the Education of Young Children and has a five-star North Carolina license—the highest quality rating in the state. Teachers at FPG tend to be more educated than is typical of child care providers in the community, with most having a four-year degree, and many having a North Carolina Birth-to-Kindergarten teaching license, according to P.J. McWilliam, who directs the center.

"A more educated staff and lower child-to-adult ratios leads to more engaging and developmentally-appropriate activities going on in the classrooms," McWilliam says. "Teachers' interactions with children tend to be more positive, aimed at facilitating social-emotional development rather than merely controlling undesirable behavior."

Children with disabilities participate in all classroom activities, at whatever level of ability they are capable, and provided with whatever level of assistance they may need. "Sometimes a child's participation requires an extra hand, special materials, a piece of adapted equipment, or just plain old creative thinking on the part of a teacher or specialist," McWilliam says.

While they may hold degrees and licenses, few teachers enter the program with extensive experience in working with children with disabilities. "A lot is learned on the job," McWilliam adds.

Although a team of specialists supports each child's developmental progress and inclusion, children at FPG are not pulled out of their classrooms for therapy. Instead, specialists share their expertise through consultation with teachers and, less frequently, through direct intervention within the context of classroom routines. These routines include morning circle, meal times, outdoor play, pretend play, storybook reading, and field trips.

The role of specialists and the purpose of therapy are to enable each child to participate in the regular early childhood curriculum and to support his or her membership in the group. "The fact that children stay with the same group of buddies for at least their first three years of enrollment at FPG helps," McWilliam says.

Team approach

FPG's approach to special services relies heavily on teaming. The program is fortunate to have an on-site special services staff, which consists of a service coordinator (special educator), a speech-language pathologist, an occupational therapist, a physical therapist, and a behavior analyst.

"Although some of our specialists only work part-time for the program, the *consistency* in who works with the children and teachers makes a big difference," McWilliam says. "Regular and effective communication among members of the special services staff and, perhaps more importantly, between the special services staff and the classroom teachers is critical. Stolen moments during a specialist's visit to the classroom, a chance encounter in the teacher's lounge, or a few words shared out on the play yard allow for informal communication and intervention updates with teachers."

Additional time, however, is required for more in-depth communications about children's progress and needs. The special services staff tries to meet more formally with each teacher at least every other week for an hour or so to discuss the children. In addition, formal individualized education plan (IEP) meetings and individualized family service plan (IFSP) meetings are scheduled for each child, along with meetings to review and update these plans.

Partnership with parents

Child care center staff emphasize that effective parent-teacher partnerships are a key factor in meeting the needs of children with special needs, as well as those of children who are typically developing. The cornerstone of these partnerships is honest and ongoing communication. This can take many forms, from informal chatter at the beginning or end of the day to more formal parent-teacher conferences. Short notes about the child's day that are stuck in a diaper bag or cubby, as well as e-mail messages or evening phone calls are other good communication techniques. "The more open, honest, and frequent the communication, the more effective the partnership will be between parent and teacher," McWilliam says. "The same holds true for relationships between specialists and parents.

In fact, parents of children at FPG actually *lead* the team in identifying appropriate goals and priorities for intervention with their child. Over the past year, the program has adopted a routines-based approach to intervention planning whereby the skills and behaviors that children need to be successful in their daily routines are the focus of the intervention plan. This has helped to insure that parents' values and priorities are clearly communicated to the team and that parents actually direct the design of interventions for both home and classroom."

Parents of children with special needs are also encouraged to be involved in classroom activities in the same ways as parents of typically developing children. This may mean joining the class during morning circle time, going on a field trip, volunteering in the classroom, attending classroom potluck dinners, or attending FPG's parent advisory board. These parents, like all other parents in the program, are free to choose the type and level of involvement that they find meaningful and that fits into their busy schedules.

A touch of magic

Research suggests that parents of children with special needs and those who are typically developing have concerns as to whether the benefits of an inclusive classroom setting outweigh the drawbacks. The experience at the FPG child care center, as well as wider research in the field, suggests that benefits do outweigh the drawbacks.

"There have been times," admits McWilliam, "when I've wondered what the children with more severe disabilities get out of being in our program...whether it really matters to them that they are in a setting with typically developing peers. Again, there are a few moments here and there that make me realize that the answer is yes."

"Research has shown that in high-quality child care settings, there are clear benefits from inclusion," says Don Bailey, director of the FPG Child Development Institute. "First, children with disabilities and those without do play together. Second, children with special needs engage in more social behavior in inclusive settings than they do in segregated settings. Third, there are no negative consequences for typically developing children placed in inclusive settings. To the contrary, these children develop an appreciation for the differences."

McWilliam admits that even in programs like FPG's, where resources are more plentiful than others, inclusion isn't always easy, nor is it inexpensive. But witnessing the benefits makes the effort worthwhile.

"There's a little boy named Jake in one of our two-year-old rooms who has severe and multiple disabilities," McWilliam says. "He has been in our program, and with the same group of children, since he was an infant. Despite the fact that Jake can't do many of the things that the other children in the classroom can, it is clear from watching and listening to the other children that they consider him a true member of their group. They always notice when he's out sick and they insist upon his name being included in any conversations about the group. They have always approached him readily to play with the adaptive toys on the tray of his wheelchair or special seat and they encourage Jake to activate them, too—after they've had their turn first, of course!"

"One day last week," continues McWilliam, "I was in this same classroom and noticed Jake lying on the floor under a cross bar with toys suspended from it. Another 2-year-old, Demarcus, had joined him under the crossbar and was lying cheek to cheek with Jake, trying to tuck a doll blanket under both of their chins. Demarcus wasn't doing this for adult attention," explains McWilliam, "His affection for Jake seems quite sincere. It's heartwarming to witness."

"There have been times," admits McWilliam, "when I've wondered what the children with more severe disabilities get out of being in our program ... whether it really matters to them that they are in a setting with typically developing peers. Again, there are a few moments here and there that make me realize that the answer is yes."

"One day Jake wasn't feeling well," says McWilliam, "so I offered to take him for a walk around the halls in his stroller. As I rounded a corner, his buddy Demarcus burst through the front door, saw Jake in his stroller, and immediately started talking to him. Jake's crying stopped almost immediately and he started to coo. It seemed clear to me that Jake recognized the sound of his friend's voice, that it comforted him in some way, and that he appreciated and benefited from their relationship—albeit in his own manner."

"We all benefit from inclusion," McWilliam adds. "But some of the most important benefits have nothing to do with IQ scores or later school achievement. Perhaps some day, these less clearly measurable outcomes will be understood to be of greater value."

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Cost, Quality and Outcomes of Preschool Inclusion

For two decades FPG has been conducting research on inclusion. One of our newest research projects on inclusion at FPG, funded by the US Department of Education, is examining widely used ways to implement preschool inclusion: community-based itinerant services, Head Start centers and public school classrooms.

Project Director Virginia Buysse, a scientist at FPG, explained, "Across these three organization models, we'll be looking at the relationships among program costs, program quality and outcomes for preschool-age children with disabilities and their families."

Buysse and her team will collect information from nine North Carolina programs, involving 90 children and families. Sam Odom, principal investigator at Indiana University, will gather the same information on preschool programs in Indiana.

The outcomes will be documented through developmental measures and assessments of friendship formation and peer relations. The programs' quality will be measured through an environmental rating scale, an ecobehaviorial observation tool, and an assessment of the quality of inclusion.

Virginia Buysse, Project Director

Buysse said the costs per child will be assessed through methods developed by the Center for Special Education Finance in Palo Alto, CA, and statistical tests will examine the relationship between program quality and outcomes as well as differential costs between higher- and lower-quality programs.

"We expect to offer information that can be used to guide families, teachers and local program administrators in selecting appropriate placements and designing quality improvements of inclusion preschool programs," she said. Findings will be available in 2004. | ed |

Children with special needs in child care, including those enrolled in the FPG Child Care Program, receive specialized services such as physical therapy, special education, occupational therapy, and speech-language pathology. FPG has a history of conducting research on specialized services and has a current project demonstrating recommended practices in this area.

Connecting Research Findings to Classroom Practices

Robin McWilliam, Project Director

For 10 years, Robin McWilliam has been examining and demonstrating the efficacy of different methods of providing specialized services. This work has included a national survey of disability specialists and therapists; studies with individual children and groups of children; and focus groups with parents, service providers, and administrators.

McWilliam summarized the most important findings from these studies in this way: "Specialized services need to be provided in classrooms, in collaboration with the classroom staff, so the staff can carry out the interventions throughout the day. All the worthwhile intervention occurs between specialists' visits. Integrated therapy and integrated special education are more effective than pulling children out for these services."

The key dimensions of inclusion, based on research, demonstrated at the FPG Child Care Program are—how to use routines-based assessment—how to integrate therapy and special education, and—how to use embedded interventions. McWilliam says, "All three of these dimensions are designed to maximize the amount and effectiveness of intervention for children with disabilities."

The FPG Child Care Program employs integrated therapy with the assistance of another FPG project, Individualizing Inclusion in Child Care. This federally funded model demonstration project has helped the staff organize the demonstration aspect of their inclusionary practices. Integrated therapy is achieved through collaboration, especially between teachers and specialists. Specialists provide therapies in the classroom, weaving interventions into classroom activities and consulting with teachers. "Because the specialists are in the classroom and see what the child is able to do, they develop feasible strategies with the teachers so that intervention occurs even when the specialists are not present," says Stacy Scott, coordinator of the Individualizing Inclusion in Child Care Project. "If you go into one of the classrooms to observe, you'll see that in just about every classroom routine, at least one, and often several, of a child's intervention goals is being addressed by a teacher." |ed|

To learn more

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Integration of therapy and consultative special education: A continuum in early intervention. McWilliam, R.A. (1995). *Infants and Young Children* 7(4), 29-38.

Integrating therapies into the classroom. Scott, S.M., McWilliam, R.A., & Mayhew, L. (1999). *Young Exceptional Children*, 2(3), 15-24.

For more information about the Individualizing Inclusion project, please contact Project Coordinator Stacy Scott at 919-966-5943 or email Stacy_Scott@unc.edu. **Project web site:** www.fpg.unc.edu/~inclusion.

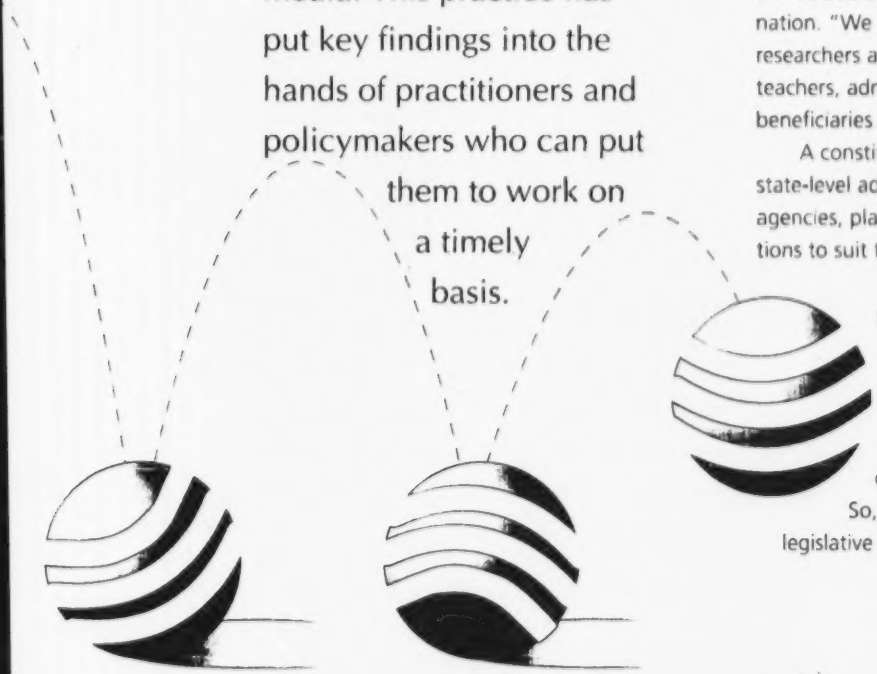
For more information about the FPG Child Care Program, contact Dr. P.J. McWilliam at (919) 966-5098 or email mcwillpj@mail.fpg.unc.edu.

NCEDL

Committed to Sharing

1997 5 YEARS 2002

Academic institutions are not generally noted either for the widespread use of their scholarly articles or their ability to disseminate findings quickly. The National Center for Early Development & Learning (NCEDL) has broken that mold by sharing findings of their research on early childhood development through a diverse array of media. This practice has put key findings into the hands of practitioners and policymakers who can put them to work on a timely basis.



Comprised of a consortium of researchers at the University of California at Los Angeles, the University of Virginia, and the University of North Carolina, NCEDL is one of 12 centers funded under the US Department of Education's Office of Educational Research and Development. It is the only center devoted to research in early childhood development. Since its inception in 1996, NCEDL has sponsored dozens of studies whose findings expand the understanding of early childhood education and development. However, getting those findings out to the broad and amorphous target audience that works with or formulates policies for young children has been a major challenge.

NCEDL has approached this task by developing a comprehensive dissemination infrastructure for a diverse array of publications. The bedrock of NCEDL's publications are peer-reviewed articles on research conducted by the center, articles that are ultimately published in scholarly journals. These form a solid scientific base for other materials—press releases, technical briefs, brochures—that put key information into more readable and timely formats usable to a wider audience.

"In our original grant, the US Department of Education made a point of stressing that the results of our research need to reach a wide audience," says Pam Winton, who directs center dissemination. "We were not satisfied to communicate only with fellow researchers and academics. We sought to find ways to reach the teachers, administrators, parents, and policymakers who are the beneficiaries of our research."

A constituent advisory board, comprised of parents, teachers, state-level administrators, and childhood resource and referral agencies, played a key role in helping NCEDL shape the publications to suit the various audiences.

"At one point, we planned to release a technical report on child care quality with the intention of reaching an audience of administrators and policy makers," Winton says. "Our advisory board told us that the legislators needed something they could 'hold in one hand and read while they were talking on the phone and eating lunch at the same time.' So, we ended up preparing a four-page brief for the legislative staff and a one-page fact sheet for legislators."

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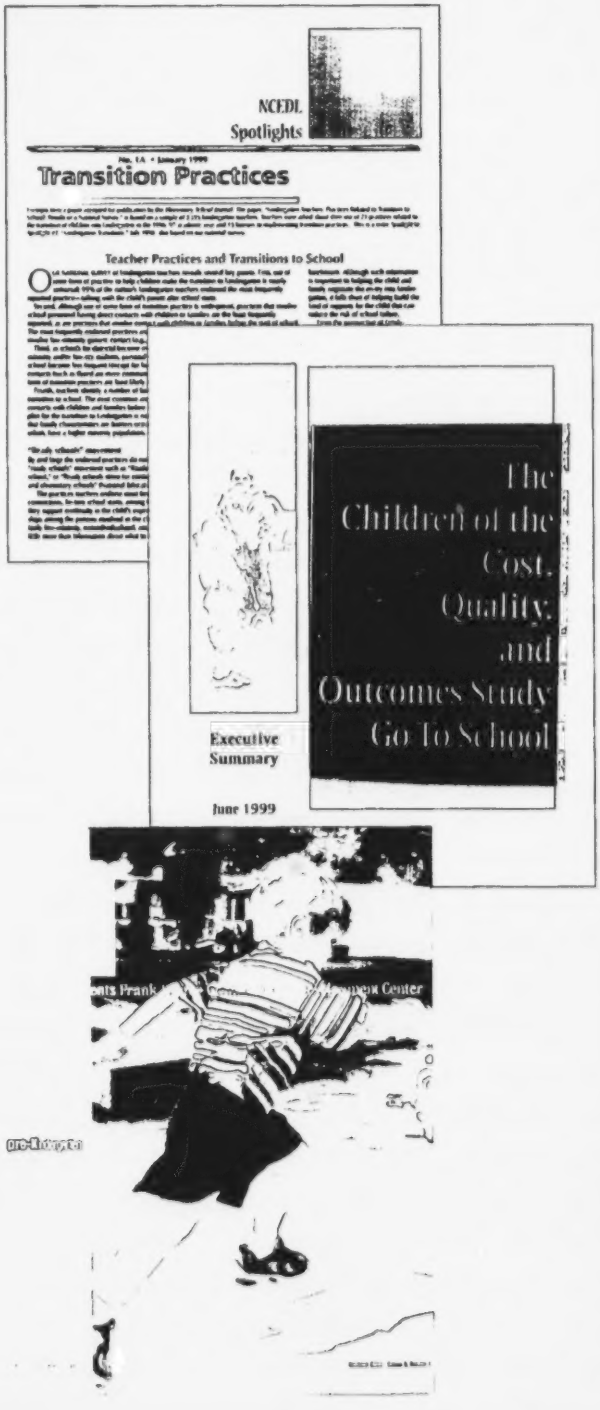
NCEDL has disseminated more than 425,000 copies of major products during its first five years.

To gain the widest audience for their research findings, NCEDL focuses on disseminating the information in ways that are easy for other organizations to customize and redistribute. Press releases are written following a "Swiss cheese" approach, whereby "holes" are left in the stories in which local publications can insert their own information. *Spotlights*, the center's one-page summaries of research findings and events, is disseminated to publishers of statewide, regional, and national newsletters, who are then encouraged to reproduce it in their own publications. NCEDL publishes an electronic newsletter (*Enews*) that is sent to various listservs, through which it is redistributed it to other audiences. NCEDL also hosts a web site, **www.ncedl.org**, on which summaries of all NCEDL activities and projects are posted and available for download.

The versatility of NCEDL's information dissemination capabilities was demonstrated in the activities around the center's 1999 Cost, Quality, and Child Outcomes study. This study provided solid evidence that such factors as child-staff ratios, teacher qualifications, and staff training at child care centers affect children's sociability, language and cognitive development, and self-control. While the researchers prepared and submitted scholarly articles, they also developed a media plan to roll out key findings in advance. They wrote press releases and held a press conference in Washington, DC. A technical report, reviewed and approved by outside experts, was posted on the web site and made available in print. A *Spotlight* was prepared and sent out to interested organizations, as well as being posted on the web. An *Enews* report went out through *Enews* list and listervs.

NCEDL's web site has been particularly effective as an information dissemination tool. Along with summaries of NCEDL studies and activities, the web site also contains lists of related publications, issues of *Early Developments* (available for download), lists of experts and funding sources, and links to related sites. The web site averages over 1,000 hits per month, with users including students, parents, program administrators, teachers and policymakers. Usage has grown over time and peaks around key events, such as press conferences.

A large number of NCEDL's products are directly disseminated by center researchers and staff through presentations, meetings, electronic distribution, and mailings to individuals. NCEDL has also published a number of books summarizing



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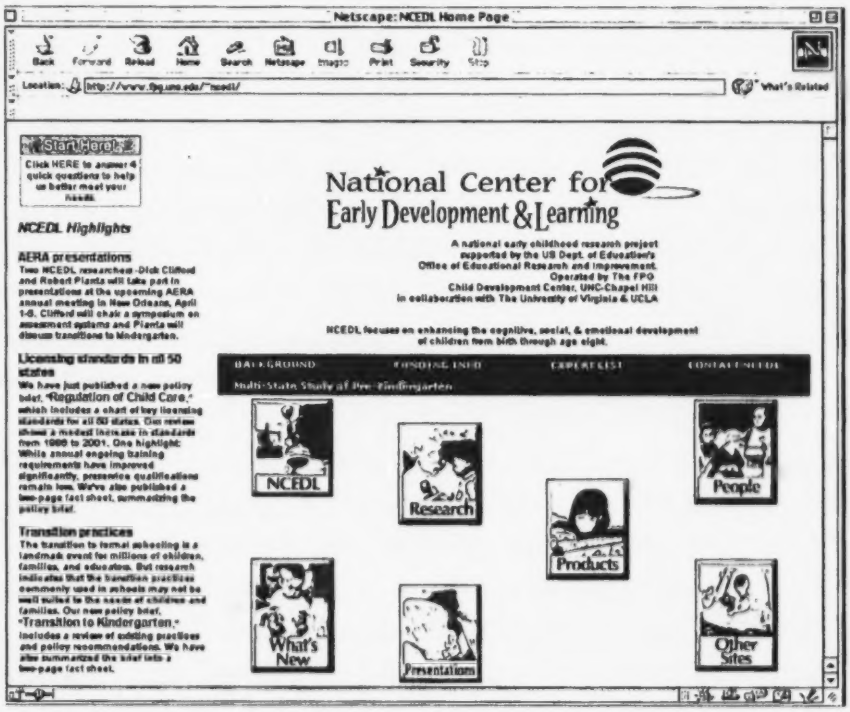
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A national early childhood research project supported by the US Dept. of Education's Office of Educational Research and Improvement. Operated by The FPG Child Development Center, UNC-Chapel Hill in collaboration with The University of Virginia & UCLA
NCEDL focuses on enhancing the cognitive, social, & emotional development of children from birth through age eight.
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presentations in major conferences synthesizing research on early childhood issues. Collectively, this information is making a difference according to policymakers.

"We have made progress toward full-day kindergarten in Indiana because we've been able to hold up the research that says children need stimulating early childhood environments to do well in school," says Jayma Ferguson, Early Childhood Specialist for the Indiana Department of Education. "We don't have the time or the money to do the research ourselves. That is why what NCEDL is doing is so important. They have responded by putting together the products we need."

Altogether, NCEDL has disseminated more than 425,000 copies of major products during its first five years. Winton credits this success to the center's partnerships with other groups and its development of the web site. "Approximately 32% of our products were disseminated as a result of collaboration with other centers, agencies, or groups," she says. "Another 33% were downloaded from the web site. Thus, 65% of our product dissemination was quite cost effective and reached audiences that we would not have been able to had we relied solely on traditional methods."

Winton credits Loyd Little, NCEDL's communication specialist who has decades of experience as a working journalist. "Loyd understands the media and how to work with them," Winton says. "His contributions to the effort have been critical. At FPG we pride ourselves on our interdisciplinary work. Adding journalism to our mix of staff has yielded great benefits." |NCEDL|

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Assessing Early Intervention

ITERS
ECERSR
EISAS

Early intervention, the system of services providing support to infants and toddlers with disabilities and their families, has long been a focus of research at FPG. Much of this work has centered on enhancing the quality of intervention policy and practice. In the most recent (1997) reauthorization of the Individuals with Disabilities Act, the federal government directed states to implement strategies to assess **quality** of services, in addition to monitoring for compliance with regulations. To address this need, researchers at FPG are working to develop and refine an instrument which they hope will become a widely-accepted measure for assessing early intervention programs nationwide.

Drawing upon well-established rating scales of child care environmental quality (e.g., ECERS-R, ITERS) developed by FPG researchers, the Early Intervention Services Assessment Scale (EISAS) defines high-quality practices across the broad spectrum of early intervention services. Principal investigator Lynette Aytch says a major challenge has been developing a tool that can effectively evaluate a complex system of services, people, and settings.

"We spent a lot of time looking at what the literature says about quality early intervention practice and combined this with a lot of dialogue with parents, service providers, program administrators, and other researchers," Aytch says. "This led to the design of an instrument that we believe reflects early intervention program quality."

To test the actual utility of EISAS in the "real world" of early intervention programs, researchers conducted a field study involving 29 early intervention programs across 8 states.

Lynette Aytch
Principal Investigator

"In this study, we were able to collect EISAS data from 155 early intervention staff and 450 parents of children served by these programs," Aytch says. "We are now in the process on analyzing and reporting our findings."

Preliminary findings from the field suggest that overall, the EISAS has good content validity. That is, the content of the instrument adequately represents the range of intervention services and quality practices. However, the field study also indicates that program self-assessment has significant limitations.

"Our findings suggest that programs tended to rate themselves as high, despite data which suggest that the programs varied widely in quality," Aytch says.

Researchers are currently refining the instrument and will conduct more studies with early intervention programs across the country.

| NCEDL |

To learn more

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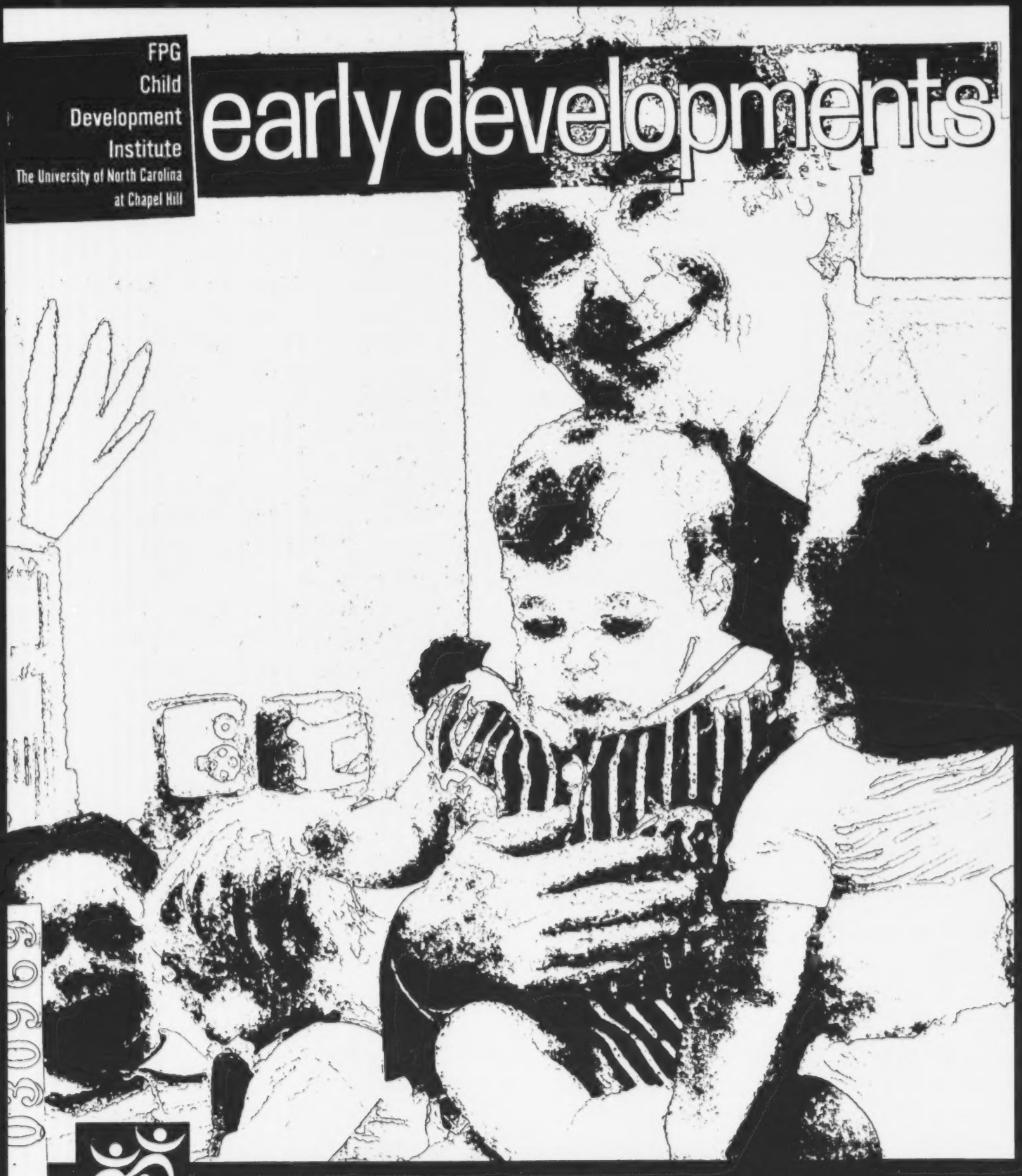

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Child & Family Policy

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news

MARY RUTH COLEMAN, FPG Scientist and Clinical Associate Professor in the UNC-CH School of Education, was recently elected for a three-year term to the Board of Directors of the Council for Exceptional Children (CEC). CEC is the largest organization for special educators, individuals with special needs and their families in the world.

LYNETTE AYTCH, FPG Investigator, was recently elected to the Board of the Division of Early Childhood (DEC), a sub-division of CEC.

PAM WINTON, FPG Senior Scientist and Director of Outreach and Research Professor in the UNC-CH School of Education, now serves as Associate Editor of the *Journal of Early Intervention.*

ELEANOR RICHARDSON, longtime volunteer and former employee in the nursery of the FPG Child Development Institute, received this year's C. Knox Massey Distinguished Service Award for "unusual, meritorious or superior contributions" by UNC employees. Honorees receive an award citation and a $5,000 stipend.

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Informing Public Policy

by Don Bailey, Director

IF INVESTIGATORS AT THE FPG INSTITUTE studied astronomy, we probably would not be concerned about public policy. But since our work focuses almost exclusively on programs and services for children and families, it is of enormous relevance to policy makers. These individuals in local, state and federal government must make decisions about which programs to fund, how much money to allocate and what regulations are needed to assure equitable access and achieve the program's desired outcomes.

Just think about the array of laws and regulations that directly affect children and families. Head Start represents a large federal commitment to improving the health and development of children living in poverty. The Individuals with Disabilities Education Act requires free, appropriate, public education for all children with disabilities and provides financial incentives and guidelines to assure that states comply with this requirement. And the list goes on. Welfare reform, childcare subsidies, Medicaid, child care regulations and state initiatives for prekindergarten programs all represent policy decisions that commit public resources and establish standards by which those resources are to be used.

How are public policy decisions made? Research informs public policy, but ultimately policy decisions are based on factors that include cost, public demand, timing and politics. Policy research attempts to understand the various factors influencing policy development. Policy research also examines specific policies and determines whether they really result in the intended outcomes.

Jim Gallagher, former director of FPG, has always believed in the power of policy to make a real difference in the lives of children. He should know. In 1967 he was asked to serve as Associate Commissioner of Education, and Chief of the Bureau of Education for the Handicapped in the US Department of Education. This was a very prestigious appointment, as the BEH had just been established and the role of the federal government in the lives of exceptional children was just beginning to be formulated. Jim's work at the Department of Education had a profound influence on setting standards and directions for a federal role, and his mark on the department can still be seen today in what is now known as the Office of Special Education and Rehabilitative Services.

When he came to FPG, he began a series of policy studies that have helped the field understand the role of policy and what it takes for policy to be implemented effectively at the local level. He trained several generations of policy researchers, and his influence is evident both here at FPG and in many places around the country.

As an institute, we try to shape policy by providing information to help policy makers make informed decisions. We distinguish this work from advocacy, in which an individual or organization pushes for a particular piece of legislation or funding. Many advocacy groups exist, and they play an extremely important role in fostering social change. What we can do is provide objective information and systematic analysis of issues so that both policy makers and advocates will have as many facts at their disposal for weighing the costs and benefits of various programs.

This issue of *Early Developments* highlights some of the policy work currently underway at FPG. We also use this issue as an opportunity to celebrate the many contributions Jim Gallagher has made to the field and his influence on the current generation of policy researchers.

On a personal note, I have now served as director of FPG for 10 years. Jim Gallagher was one of the major reasons I joined the center and his legacy as director has continued to serve as both a challenge and an inspiration for me. Never one to interfere, but always available to listen and support, he is often the first in line to volunteer to help with any project. I was hoping to catch up with him someday, but Jim, you are one of a kind. Carry on! |ed|

Legend & Legacy in Special Education

IF THERE WERE A SPECIAL EDUCATION HALL OF FAME, Jim Gallagher surely would be an inductee. A number of people have earned renown in special education for their research, teaching, or policy-making, but few have made significant contributions in all three fields. Jim Gallagher, FPG Senior Scientist and Kenan Professor Emeritus of Education, is that rare exception.

"Jim Gallagher is a protean source of ideas, enthusiasm and collegiality," says Rud Turnbull, co-director of the Beach Center on Disability at the University of Kansas. "His ideas began with his seminal concept of an individualized education contract and have carried through to his most recent work-in-progress, his treatise on special education policy. His enthusiasm has never waned; that is because it is undergirded by a deep commitment to students with disabilities and their families and professional providers, and because he brings an infectious buoyancy to his work."

On September 26, FPG will sponsor a symposium to honor Gallagher for his nearly five decades of contributions on behalf of the education of gifted children and children with disabilities. Such events are usually reserved for an individual about to enter retirement. In Gallagher's case, the energetic Irishman will accept his accolades and return to the field.

Nationally and internationally, Gallagher may be best known for his research and writing, if for no other reason than he has produced so much of both. The articles, monologues and books that he has authored or co-authored number well over 200. It is rare to discover a student of special education who is not familiar with at least one of his textbooks. *Teaching the Gifted Child* (Allyn & Bacon),

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now in its fourth edition, has been called the Bible on the subject of educating gifted children. *Educating Exceptional Children* (Houghton Mifflin), coauthored with Sam Kirk and Nick Anastasiow, has been through 10 editions and serves as the introductory text to many courses on special education for children.

As long as he has been a researcher, Gallagher has been a teacher. He began in 1954 as an assistant professor at the University of Illinois, eventually rising to Associate Director of the university's Institute for Research on Exceptional Children. In 1970, he was named Kenan Professor of Education at the University of North Carolina at Chapel Hill. Over his 30 years of teaching at that institution, he trained many graduate students who went on to become leading professionals in the field, including Ron Haskins, former senior staff person for the House Ways and Means Committee and now a welfare reform specialist in the Bush administration.

As a teacher, Gallagher sought to bridge what he perceived as a gap between academicians and politicians in communicating and understanding early childhood education issues. In the mid-70s, he secured funding from the Bush Foundation (part of 3M Company) to put together a program of biweekly seminars on policy making for doctoral students in early childhood education. Many of his former students who are now practicing professionals fondly remember Gallagher's instruction on how to translate knowledge into political action.

"Because he'd worked on Capitol Hill, Jim knew as much about the politics of special education as he did about research," says Pam Winton, a former student at UNC and now Senior Scientist at FPG. "He taught us how to use research findings in a way to impact policy, how to think about problems in a way that could translate into results.

"Jim was the person who introduced me to the term 'RFP'," Winton laughs. "He taught us how to get money from the federal government to actually fund programs benefiting children with special needs."

As well as being a world-class researcher and educator, Gallagher became a heavy hitter in the field of public policy. In 1967, John Gardener, then head of the US Department of Education under President Lyndon Johnson, tapped Gallagher to head the newly formed Bureau of Education for the Handicapped. Key members of Congress had indicated support for a program supporting preschool age children with special needs. Gallagher and his team responded by devising a demonstration program directing federal funds to 20 exemplary programs supporting young children with disabilities.

"Few in America recognized the importance of linking child development research to social policy as early as Jim Gallagher did," says Lynn Kagan, Professor of Early Childhood and Family Policy at Columbia University Teachers College. "Even fewer had a keen sense of how it could and should be done."

Later, as Director of FPG, Gallagher proposed to the Bureau to develop a system of technical assistance for these demonstration programs. FPG later won a contract to do just that and proceeded to develop a national system of technical assistance now known as NECTAC (see page 11).

"This support system of technical assistance strengthened already good programs and brought credibility to the demonstration center program," Gallagher says. "The program gradually increased its membership and became a visible example of what could be done to help young children with disabilities."

FPG Photo Archives

Career Highlights

1954
appointed Assistant Professor at the University of Illinois at Urbana. Later named Associate Director of the Institute for Research on Exceptional Children

1967
named Associate Commissioner of Education at the U.S. Office of Education and Chief of the Bureau of Education for the Handicapped

1967
J.E. Wallace Wallin Award for Contributions to Special Education, Council for Exceptional Children

1970
hired as Director of Frank Porter Graham Center and Kenan Professor of Education at the University of North Carolina at Chapel Hill

1972
John Fogarty Award for Distinguished Government Service

1986
Distinguished Scholar Award, National Association of Gifted Children

A longtime acquaintance of the Kennedy family, Gallagher was asked in 1970 to participate in a series of meetings they were sponsoring on mental retardation. In his paper entitled "A Special Education Contract," Gallagher argued that schools should develop an individualized education contract with each child with special needs, one that specifies what services are being provided for the child and who will provide them. These elements were eventually included in the Individualized Education Plan (IEP) that is now part of the federal IDEA law.

A few years after his presentation at the Kennedy symposium, Gallagher was called upon to testify on behalf of the Pennsylvania Association for Retarded Children (PARC) in a suit it had filed against the State of Pennsylvania. Despite having a line in its constitution saying all children were entitled to a public education, Pennsylvania had a policy of excluding children from public school who were deemed not ready for kindergarten. "The relevant question was, can these children learn something useful?" Gallagher says. "I was one of four expert witnesses who asserted the answer was 'yes.'"

The court subsequently ruled that Pennsylvania had to admit those students into the public schools. That case is now looked upon as a landmark in the special education field and helped lead to the formulation and passage of the federal Education for All Handicapped Children Act, the predecessor of IDEA. "It was Jim Gallagher who, as expert witness for the then-excluded students in the landmark PARC case, brought his knowledge to bear to lay the foundation of IDEA," Turnbull says.

At FPG, Gallagher developed a special interest in the educational needs of gifted children. Though some states like North Carolina included gifted children in their definition of exceptional children, programs to help such children were not widespread, and those that did exist tended to serve kids who needed the least help. Working with the State of North Carolina, Gallagher set up nine model centers that helped school districts plan programs to identify and serve gifted children, particularly those from poor backgrounds. On the basis of this work, North Carolina revised its laws for dealing with gifted children. Now, all local school districts must have a broad-based plan for identifying and serving gifted children.

Recently, Gallagher has turned his attention to what he describes as the missing support infrastructure for teachers dealing with children with special needs. "The teacher is the point person in providing services for these children, but there is no systematic support program behind them," he says. "The shortage of special education teachers is widespread. Many are retiring. If teachers had more of a support system, they would feel part of a team. You would attract more teachers to the profession and retain more of them for longer periods of time."

Gallagher is now writing a book entitled *Decision-making on Special Education*, addressing such issues as how much to spend on special education and how to integrate it into general education. Asked why he continues to work, Gallagher cites a quote from anthropologist Loren Eisely:

We cannot know all that has happened in the past or the reason for all these events, any more than we can with surety discern what lies ahead. We have joined the caravan...at a certain point. We will travel as far as we can, but we cannot in one lifetime see all that we would like to see or learn all that we hunger to know.

Says Gallagher, "I still hunger to know and teach what I know." |ed|

PG Photo Archives

1987
appointed as Director of the Gifted Policy Studies Program and Director of the Carolina Institute for Child and Family Policy at the University of North Carolina

1994
named co-director of the Statewide Technical Assistance for Gifted Education Program at the University of North Carolina

1995
Distinguished Service to the Field of Gifted Education and Leadership as President of the National Association of Gifted Children

1997
Distinguished Service Award, World Council for Gifted and Talented Children

2000
Lifetime Service for Exceptional Children, North Carolina Department of Public Education; Eighth Annual Razor Walker Award, UNC-Wilmington

Welfare Reform

The Impact or

James Carroli, Artville, A Kid's World

Emily, welfare recipient and caregiver of a 3-year-old daughter with severe visual impairments and developmental delays, has been informed by her caseworker that she needs to find a job. Emily says she would like to work, but needs to be at home to meet with the various therapists who come during the day to work with her child. Emily also has to take her daughter to three other sites for educational and therapeutic services. On top of this, Emily is worried about losing Medicaid for her daughter if she goes back to work. She is certain no private insurance company would cover her daughter in light of her pre-existing conditions. Emily lives in Illinois, one of the 28 states that do not exempt caregivers of persons with disabilities from time limits for welfare benefits. Seeking to enforce the time limit, Emily's caseworker insists that Emily must be creative in finding child care and getting a job. This mandate is adding another layer of stress to Emily's already fragile existence, and threatens to undermine her family's ability to function.

Families with Members with Disabilities

THE MAJOR GOAL OF WELFARE REFORMS instituted in 1996 is to move welfare recipients to work. For many caregivers of children with disabilities, this transition can be especially challenging. Exactly how the new work requirements and time limits affect the lives of these families is revealed through a project entitled "The Impact of Welfare Reform on Families with Members with Disabilities."

Headed by FPG Scientist Debra Skinner with funding from the Assistant Secretary for Planning and Evaluation/USDHHS, the project is part of a larger study, "Welfare, Children, and Families: A Three City Study," being conducted in the cities of Boston, Chicago and San Antonio. The Three-City Study monitors the consequences of welfare reform on the well-being of children and families through surveys of approximately 2,400 low-income families, video-taped assessments of 630 children and their caregivers and ethnographic observations and interviews with 256 families.

Skinner's study focuses primarily on the experiences of 42 families of young children with disabilities. Interviews and observations with these families over a three-year period provide a rich picture of how disability, poverty and welfare reform converge to impact their lives and well-being. With the passage of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) in 1996, a new program, Temporary Assistance for Needy Families (TANF), limits the time that families can receive cash assistance. It also requires beneficiaries to participate in work-related activities.

... a significant portion of the caregivers of children with disabilities had physical or mental health conditions themselves...

Skinner's research shows that for low-income persons who must care for a child with disabilities, finding full-time or even part-time work that doesn't put the child at risk is difficult. "All caregivers in the study expressed the desire to work, but some of them are unwilling to leave their young child who may need round-the-clock care," Skinner says. "Lack of child care slots for children with moderate or severe disabilities and lack of flexibility in the workplace are major barriers. Also, many jobs that these caregivers qualify for do not offer health coverage at all, or policies will not cover a child with preexisting conditions. Caregivers fear the loss of Medicaid coverage if they go back to work, and fear that their children's health and access to services will suffer."

Skinner found that a significant portion of the caregivers of children with disabilities had physical or mental health conditions themselves that limited their ability to work and carry out daily routines. "We were surprised at the high rate of poor health of mothers and other family members," Skinner says. "For the most part, these families do a tremendous job of piecing together services for their children and garnering the emotional and physical resources needed to support their families. However, these efforts take a physical and emotional toll."

Given these barriers, Skinner says it may not be feasible for some caregivers of young children with disabilities to enter the workforce. If not exempted from time limits, the loss of TANF benefits may pose further hardships for them and their children. "If they are to work, these families require a range of supports including appropriate child care and flexible workplaces," Skinner says. "Supports that would aid these families

Abraham Menashe, Challenging Perceptions, digitalvis

include extending transitional Medicaid until other health care coverage could be obtained. For parents or other caregivers of children with disabilities who are required to work, work participation could become more broadly defined to include caring for the child with disabilities, or participation in training programs for specialized care, service coordination and parent advocacy for children with disabilities. In the workplace, employees need to become aware of the difference disability may make for families, and offer some flexibility to allow caregivers to deal with their children's special health care needs. For caregivers with disabilities, targeted and appropriate job training and placement should be offered."

Skinner found that agencies that work with families in poverty are rarely aware of disability issues and the programs that serve persons with disabilities. Conversely, agencies that work with persons with disabilities are often not familiar with poverty programs. "What would help support low-income families with members with disabilities is for each type of agency to become aware of the other, and to collaborate in referring families to appropriate programs and services for those in poverty or with disabilities," she says.

PRWORA is up for reauthorization this year. So far in the debate, little attention has focused on the needs of low-income families of children with disabilities. "In the reauthorization of welfare reform, it is important that the more vulnerable members of our society not be disproportionately impacted," Skinner says. "I hope our study and others like it will raise state and federal policy-makers' awareness of the impact of welfare reform on families of children with disabilities and will lead to instituting the necessary supports to help families care for their children and obtain economic security." |**ed**|

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The web site for the larger project for which this is a component is **www.jhu.edu/~welfare**

Supporting IDEA

WITH A CONTRACT FROM THE US OFFICE OF SPECIAL EDUCATION PROGRAMS, FPG has launched the National Early Childhood Technical Assistance Center (NECTAC) to help support the implementation of early childhood provisions of the Individuals with Disabilities Education Act (IDEA). The Center will replace NECTAS, which has provided support to the states in early childhood services for nearly 30 years.

"We believe the new TA Center will carry on and build upon the tradition, commitment and foundation of the NECTAS project," says Pascal "Pat" Trohanis, director of NECTAC. "Our new contract demands a more focused approach to TA—one that seeks to influence early childhood service systems in a way that leads to more positive outcomes for young children and their families."

Since the passage of IDEA, states have made considerable progress in implementing the early childhood provisions of the law. Challenges remain, however, in assuring that all eligible children and families receive and benefit from high-quality services that address their unique priorities. NECTAC's mission is to strengthen service systems to ensure that children with disabilities and their families receive and benefit from high-quality, culturally appropriate and family-centered supports and services.

Trohanis believes that for NECTAC's assistance to yield improved results for children and families, a multilevel systems change approach is needed. Toward that end, NECTAC will target state infrastructure, personnel development, community infrastructure, service providers and practices and individual children and families.

NECTAC employs various strategies, including strategic planning, consultations, workshops, information materials, teleconferences and contributions to a topically focused web site: **www.nectac.org**. To make their information more widely available, NECTAC is affiliating with the Education Resources Information Center (ERIC) as an adjunct clearinghouse for information on early intervention and early childhood special education.

As the prime contractor, FPG will work closely with two key subcontracting organizations--the National Association of State Directors of Special Education in Alexandria, VA, and the Parents Advocacy Coalition for Education Rights (PACER) in Minneapolis, MN. |ed|

Pat Trohanis

national early childhood TA Center

IDEAs partnerships results

a seamless system of services?

Gloria Harbin

IN RECENT YEARS THE NUMBER of federal and state programs designed to help young children with special needs in this country has grown dramatically. Programs such as Head Start, Even Start and early intervention offer families of young children an array of services and supports. Altogether, these programs should form a seamless system allowing children and families to get the services they need with minimal hassle. But how easy is it for a family to learn about these services and access them? How comprehensive are early intervention services and how well-coordinated across different agencies and programs? FPG Scientist Gloria Harbin has studied these questions since 1986 and her findings are revealing.

Early intervention services consist of many types of services that address children's health and development as well as supports for their families. No one agency or program offers all of the therapies or special services that an individual child or family may need. As a result, families often must seek the services and supports they need from more than one agency. Although coordinating these child and family services offered by various agencies makes sense and is federally mandated, state early intervention systems have found this difficult to achieve. The lack of coordination stems largely from the fact that each of the federal programs was developed separately—with their own mission, mandates and ways of determining who is eligible for services.

Over the years, Congress has heard testimonies of families being bounced from one agency to another; of professionals who did not communicate with each other and gave families conflicting information; of agencies' failures to refer a child to another agency that provided the service the child was eligible to receive; of family members having to quit their jobs to devote time to finding the service their children really needed; and of families providing the same family history or assessment results over and over to each agency. The lack of coordinated early intervention services has meant that some children have experienced long delays in obtaining the services they needed or, worse yet, have not received the services at all.

In 1986, Congress passed the Infant-Toddler Program, Part C of the Individuals with disabilities Education Act, which included, among other things, a remedy to this problem. A comprehensive system for early intervention, coordinated across multiple agencies and disciplines at both the system and individual level was a key component of the new legislation. Since the law's passage,

Harbin has studied the effectiveness of the federal requirements that early intervention services be integrated and coordinated across programs and agencies. She is among the few researchers to do this on a national scale.

Harbin's research has focused on the state and local levels where most of these programs are housed and administered. Her state-level studies, conducted primarily between 1987 and 1992, analyzed the amount of coordination, approaches to coordination, agreements among agencies, structures and linkages to facilitate coordination and outcomes of coordination. At the local level, Harbin has analyzed nine communities in three states from 1992 to 1997. She is still following three of those communities and has been studying all communities in North Carolina for the last four years.

Harbin has identified six levels of coordination at the state and local level. Her recent research indicates that most states are using one of the three less comprehensive and coordinated models. "In general, states have not put together a comprehensive system of services," Harbin says. "Most focus only on a child's educational and therapeutic needs."

The result, she says, is that adults and children with disabilities in many communities do not feel supported, but instead feel unwelcome and stigmatized by their community.

By contrast, communities such as Canyon City, CO, that took an integrated approach to providing services yielded a much higher degree of satisfaction and sense of belonging among families in need. "We found the best outcomes for kids in the broadest and most coordinated service systems, those that were designed to serve all children and their families," Harbin says. "In other words, children with disabilities are more likely to receive better services if communities begin to plan more cohesive and integrated systems for children rather than allowing programs to function in isolation." Harbin said that a parent in her study said it best: "We never ran into the walls of the system in Canyon City like we did in the community where we previously lived."

...an integrated approach to providing services yielded a much higher degree of satisfaction and sense of belonging among families in need.

Based on her findings, Harbin sees a need for communities across the nation to integrate *all* programs for *all* children and families into a cohesive whole. She admits there are significant political, financial and psychological barriers to doing this. The single most important ingredient to accomplishing integration, she says, is leadership.

"The presence of leadership or the lack of it is a major key to success or failure," she says. "We need university programs that will train a generation of community leaders who have a vision of interagency cooperation and a comprehensive system of services and resources that supports and actively nurtures the development of *all* children in the community, instead of only some of the children. |ed|

Six Levels of Service Coordination*

1. Single program
2. Network of programs beginning to coordinate
3. Primary coordination with intervention, secondary coordination with other agencies
4. Multiagency system with some leadership coming from lead agency
5. Multiagency system—leadership and decision making dispersed among agencies
6. LICC is lead agency for comprehensive and cohesive system for all children

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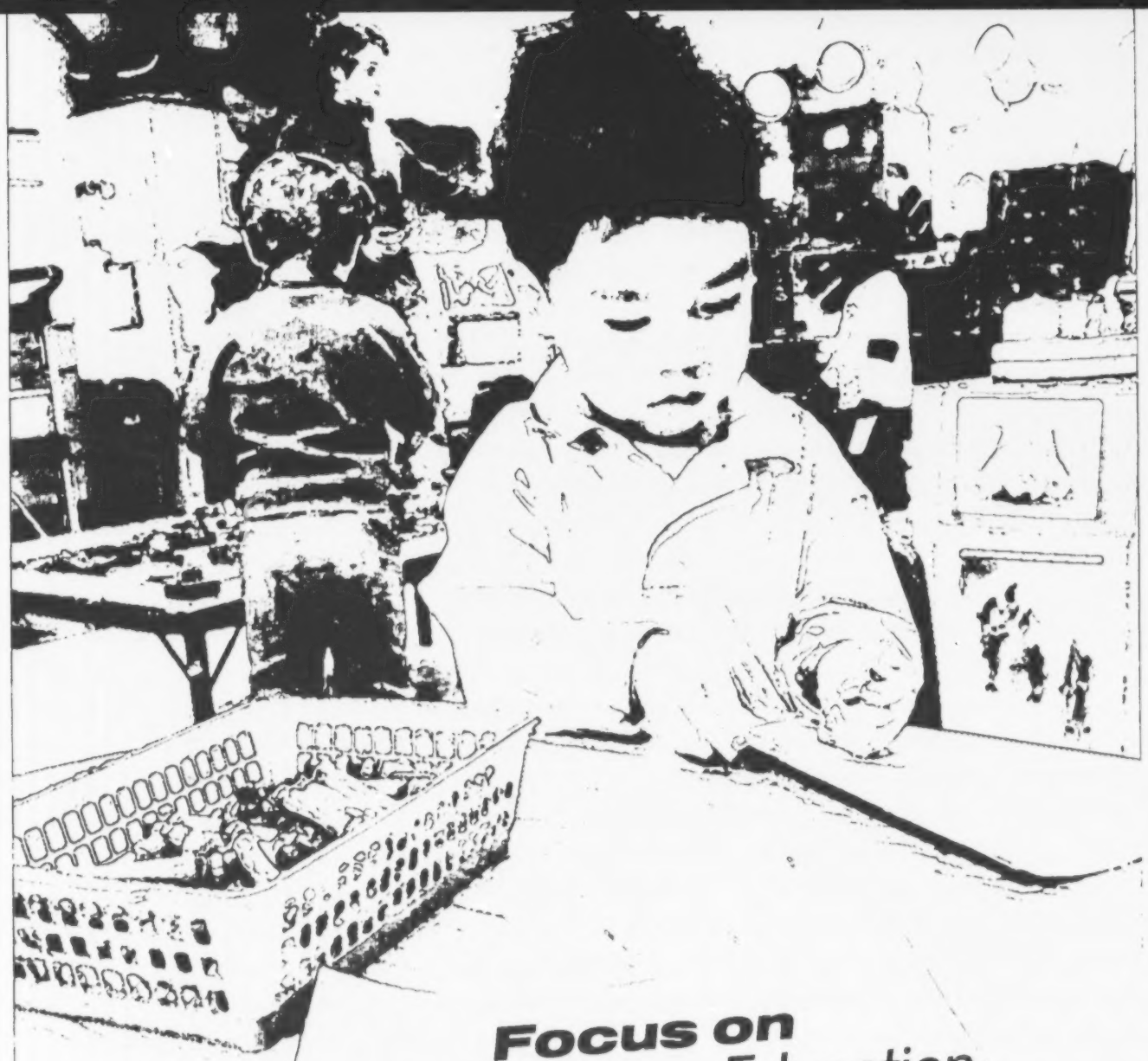


Focus on Prekindergarten Education in the US

WITH MORE MOTHERS OF YOUNG CHILDREN entering the workforce and a growing recognition of the importance of early learning experiences in preparing children for school, the American public and educators alike are focusing on the need for high-quality prekindergarten programs for 4-year-olds. Many other countries already offer universal prekindergarten programs for 3- and 4-year-olds. In the US, federal and state governments have been reluctant to assume responsibility for educating children prior to school entry into kindergarten, but that appears to be changing. At least 42 states currently offer some type of prekindergarten program, and a few such as Georgia, Oklahoma and New York are moving towards a voluntary prekindergarten program for *all* 4-year-olds.

Adding import to this national trend is the passage of President Bush's No Child Left Behind Act in January 2002 (**www.NoChildLeftBehind.gov**). This law seeks to ensure that public schools are teaching students what they need to know to be successful in life. It also draws attention to the need to prepare children for academic success before they start formal schooling. In response to this new educational policy agenda, FPG has launched two major initiatives—the NCEDL Multi-State Prekindergarten Study and a National Prekindergarten Center (NPC) to assist states in the development of high-quality prekindergarten programs.

NCEDL Multi-State Study

ACROSS THE COUNTRY, states are rapidly expanding school-linked prekindergarten programs at a cost exceeding $2.9 billion. Although these efforts are commendable, states are launching these programs without basic knowledge about the nature of prekindergarten policies and services or of the implications of decisions about the basic design of the programs. The National Center for Early Development & Learning (NCEDL), housed at FPG, seeks to close this information gap through a multi-state study of prekindergarten services.

"It's amazing how little is known about these programs," says Donna Bryant, co-director of the study along with Richard Clifford. "Does it matter if there's a lot of reading in these programs, if it's full-day or half-day? These are the kinds of things states should know."

"Some states have conducted individual studies of prekindergarten services, but each study uses different measures, so we can't compare results across states." Clifford adds, "While there have been major national studies of Head Start, child care and early intervention, there has not been a single large-scale, multi-state study of prekindergarten services. Given the amount of state and federal money going into these programs, the need for such a study is urgent."

NCEDL's Multi-State Prekindergarten Study has two primary purposes: 1) to describe the variations of experiences for children in prekindergarten and the impact of these variations on children's basic development, and 2) to examine the degree to which the prekindergarten experiences prepare children for kindergarten and early schooling.

Primary questions being researched include the education and experience of teachers and teacher assistants in school-linked prekindergarten programs; the nature and distribution of practices in areas such as literacy, math and teacher-child relationships; how quality and practices vary as a function of child and teacher characteristics and classroom and program variables; and whether children's outcomes can be predicted by their experiences in prekindergarten programs.

Prior to launching the study, NCEDL conducted a survey of state-level personnel in every state and the nation's capital to learn about state-funded and other school-related prekindergarten services, class size, ratios, teacher education and other structural features. Based on that survey, NCEDL selected six states for the larger study—California, Georgia, Illinois, Kentucky, New York and Ohio.

Twenty-four data collectors, four in each state, have been trained and sent into the field armed with questionnaires and assessment materials. They have visited 240 preschool classes, 40 picked at random in each state. Four children in each classroom, also picked at random, are being followed. Researchers are currently conducting the second round of data collection on these children as they move from the prekindergarten classes into kindergarten. Data collection will be complete in May 2003.

In addition to assessing classrooms teachers and students, FPG Fellow Oscar Barbarin (also on the faculty of the UNC-CH School of Social Work) is leading a part of the study examining the child's home environment. Researchers are conducting one-on-one interviews with parents to find out about family activities, parent attitudes toward education and the school and childrearing practices.

The NCEDL researchers would like to follow the children into the first and second grade, and are currently seeking additional funds to support this work. Collecting data as the children move from the prekindergarten classes into kindergarten and beyond will be difficult with the children scattering out to different schools.

NCEDL is a collaborative effort of researchers at FPG working with colleagues at the University of Virginia under the direction of Bob Pianta and at the University of California at Los Angeles under the direction of Carollee Howes. Other key researchers at FPG include Senior Scientist Peg Burchinal and Scientist Diane Early.

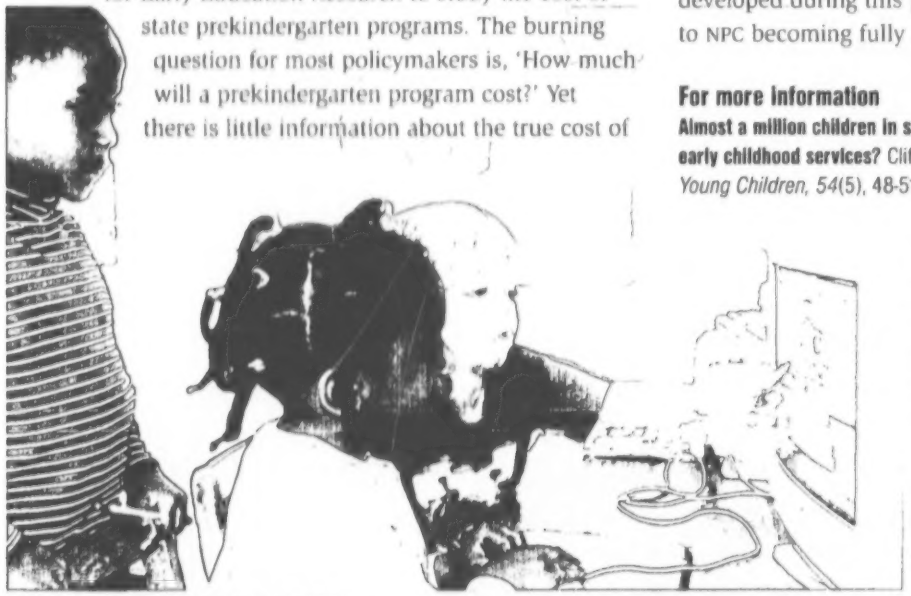
National Prekindergarten Center

UP TO THE PRESENT, states and local school districts have been launching prekindergarten programs with little technical assistance. No single organization provides research-based information to help guide prekindergarten policies and practices. To help fill this need, FPG has started planning a National Prekindergarten Center (NPC) with a one-year grant from the Foundation for Child Development.

"We envision our mission as helping local, state and federal leaders develop and implement high quality universal prekindergarten programs through our research, policy analysis, technical assistance and communications," says Kelly Maxwell, who co-directs the center with Dick Clifford. Maxwell directed North Carolina's statewide school readiness assessment and co-directs the evaluation of North Carolina's Smart Start early childhood initiative.

High-quality prekindergarten programs are being launched not only in the public schools, but also Head Start centers, and community-based childcare centers. Many states are using classrooms in all three types of programs to provide prekindergarten services."

The National Prekindergarten Center will be housed at FPG, but will partner with various organizations that address prekindergarten issues. "For us to be effective, we will need to develop strategic partnerships across the country," Clifford says. "For example, NCEDL and NPC are working together with Steve Barnett at the National Institute for Early Education Research to study the cost of state prekindergarten programs. The burning question for most policymakers is, 'How much will a prekindergarten program cost?' Yet there is little information about the true cost of prekindergarten. We hope to gather the information needed to help states understand the real cost of providing high quality prekindergarten services for children."



In addition to finance, NPC will focus its long-term efforts on governance and professional development. Governance concerns the respective roles of federal, state and local governments in administrating prekindergarten programs. "Simply put, the question is 'Who's in charge of what?'" Clifford says. "For K-12 education, state and local governments are primarily responsible for educating their children, with the federal government providing some support and technical assistance. In the prekindergarten arena, the roles are still unclear."

Professional development addresses the shortage of qualified teachers in prekindergarten programs. It is estimated that less than half of the current teachers of 3- and 4-year-olds in this country have a BA degree. "Research has shown that highly qualified teachers conduct more enriching classes," Maxwell says. "States will have to work very hard to train a sufficient number of teachers to meet the growing prekindergarten needs."

As NPC ends its planning year, Clifford and Maxwell are seeking additional funding from the Foundation for Child Development and other funding sources. NPC is already involved in research and policy work and will begin offering technical assistance during 2003. "We're excited about the new opportunities and working relationships that we've developed during this planning year and are looking forward to NPC becoming fully operational," Clifford says. |ed|

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